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**California Department of Public Health**



GAVIN NEWSOM  
Governor

Date: March 29, 2024

To: All Californians

From: California Department of Public Health (CDPH)

Subject: Future of Public Health (FoPH) Funding Work and Spend Plan Summary:  
Bay Area Region, Fiscal Year (FY) 2023-24 – FY 2025-26

## **I. Purpose and Background**

This memo provides an overview of the FoPH spend plans for FY 2023-2024 and work plans for FY 2023-24, 2024-25, and 2025-26 in the Bay Area region.

The Budget Act of 2022 (Chapter 249, Statutes of 2022) provides \$200.4 million in FoPH funding annually to local health jurisdictions (LHJs) for public health workforce and infrastructure capacity building. These funds are considered ongoing funds and part of the ongoing baseline state budget, which must be approved in the annual state budget process. The local assistance amount is pending annual budget approval for each upcoming FY.

FoPH funding is overseen by the Regional Public Health Office (RPHO), a state office within CDPH. Built upon a long public health tradition of successful interagency collaboration and recent efforts in regional coordination for the development and implementation of policy and guidance, RPHO strives to enhance bidirectional communication and coordination across California to address a wide array of cross-cutting emerging public health concerns and issues. RPHO provides support to LHJs via a model of regional coordination. RPHO regions include Rural North, Greater Sierra Sacramento, Bay Area, Central California, Los Angeles, and Southern California.

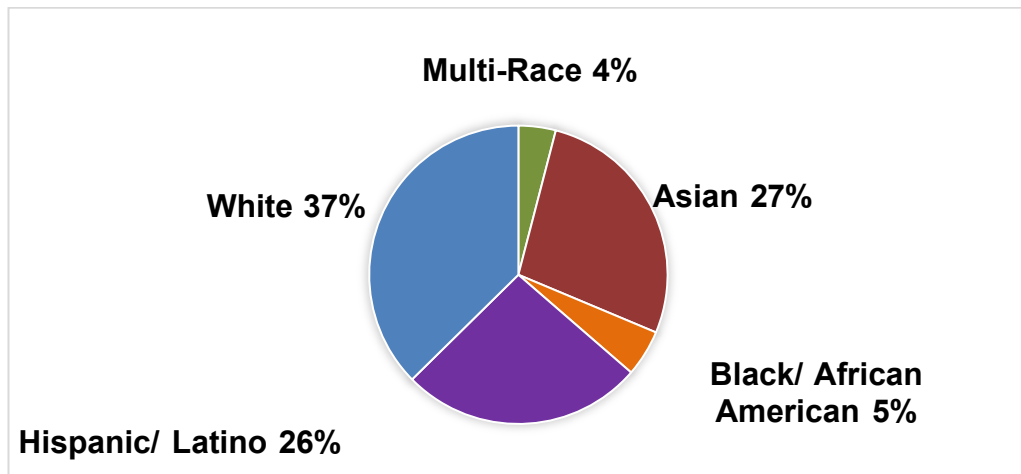
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## II. Bay Area Region



The Bay Area region comprises 13 LHJs: Alameda, City of Berkeley, Contra Costa, Marin, Monterey, Napa, San Benito, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano, and Sonoma. Known for its cultural diversity, technological innovation, and stunning natural landscapes, the Bay Area is home to iconic landmarks such as the Golden Gate Bridge, Silicon Valley, and the wine country of Napa Valley and Sonoma County. The region boasts a vibrant economy driven by technology, shipping and heavy industry, finance, and tourism. The Bay Area draws visitors from around the world with its iconic attractions and vibrant arts scene. Additionally, the Bay Area is renowned for its commitment to sustainability and environmental conservation, with initiatives focused on renewable energy and reducing carbon emissions.

### Regional Demographics



**8,297,893**  
POPULATION (2023)

**36%**  
MEDI-CAL RECIPIENTS

**15,645**  
NUMBER OF LICENSED  
HOSPITAL BEDS

**3%**  
POPULATION IN HEALTHY PLACES  
INDEX (HPI) QUARTILES 1 & 2

*Footnote: Data obtained from the following sources: Department of Finance, Department of Health Care Services, Healthy Places Index, and California Department of Public Health.*

### III. FoPH Framework

#### Foundational Public Health Services (FPHS) Framework

California's public health infrastructure requires significant, long-term investment to modernize the state's public health system. California has adopted a modified FPHS framework outlined by the Public Health Accreditation Board (PHAB) to define a core set of capabilities and programs that are vital to all health jurisdictions in building a thriving community. This framework will be used to measure and evaluate progress on the proposed three-year work plan and yearly spend plans for FoPH investment. Measured progress in the following six key service areas will indicate growth and stability of the infrastructure across the California public health landscape.

#### 6 Key Service Areas



### IV. FoPH Spend Plan

The FoPH initiative aims to transform and modernize California to effectively handle public health threats. Funds were allocated to LHJs with the intent of disrupting the disproportionate burden of preventable diseases in populations historically impacted, encouraging collaboration across counties, and making sure funds are used to supplement, or fill in gaps that existed historically and were magnified by public health emergencies, rather than supplant, existing resources. The allocation methodology focuses on the following four areas:

- **Workforce Expansion:** LHJs must leverage funding to fill critical public health positions, including those where gaps were identified by the pandemic. Each LHJ must certify that at least 70% of funds will be used to support permanent staff.
- **Reducing Health Disparities:** The funding methodology includes a base grant for each LHJ, and the remaining balance is appropriated based on population data and poverty data. Reference the funding methodology details below (in Section V).
- **Data Collection and Monitoring:** Each LHJ will be required to submit a plan to CDPH every three years that is informed by a Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) and/or local strategic plan, including proposed evaluation methods and metrics.
- **Regional Public Health Department Partnership:** Funding may be used to establish regional public health partnerships.

Additional parameters and requirements associated with FoPH funding are detailed in Health and Safety Code Sections 101320-101320.5.

### FoPH FY 2023-24 LHJ Allocations

As outlined in the statute, of the \$200.4 million allocated for local assistance, each LHJ will receive a base funding amount of \$350,000 per year. The remaining balance of the appropriation will be provided to LHJs proportionally as follows:

- 50% based on 2019, or most recent, population data
- 25% based on 2019, or most recent, poverty data
- 25% based on 2019, or most recent, the share of the population that is Black/African-American, Hispanic/Latino, or Native Hawaiian/Pacific Islander

### Bay Area Local Assistance Allocations — Fiscal Year 2023-24

LHJ	Total Allocation
Alameda	\$6,537,374
Berkeley	\$912,213
Contra Costa	\$4,844,667
Marin	\$1,241,952
Monterey	\$2,563,477
Napa	\$896,612
San Benito	\$647,267
San Francisco	\$3,639,888
San Mateo	\$3,141,653
Santa Clara	\$7,296,326
Santa Cruz	\$1,475,452
Solano	\$2,186,187
Sonoma	\$2,174,091

The funding period for FY 2023-24 is July 1, 2023-June 30, 2024. The funds allocated during the 2022-23 state fiscal period allowed for carryover of unspent funds through June 30, 2024. Carryover was only allowable by statute for FY 2022-23 funds. Starting in FY 2023-24, funds must be spent within the year allocated.

FoPH will provide ongoing state funding for LHJs through 2025-26. Future increase of the funding or changes in allocation would require legislative action.

## **V. FY 2023-2026 Work Plan Summary**

At the time of this memo, LHJs have completed and reported on their first year of work funded by FoPH (FY 2022-23). In addition, they have submitted work plans for FYs 2023-24, 2024-25, and 2025-26. Finally, LHJs have submitted spending plans for FY 2023-24. As a result, the summary below will incorporate both completed work (FY 2022-23) and projected work (FYs 2023-24 through 2025-26) that is still in process, as well as completed spending (FY 2022-23) and projected spending (FY 2023-24).

### **Work Plan Minimum Requirements**

Each LHJ must meet the following minimum requirements for the FoPH funding and describe how the LHJ plans to meet this requirement in the work plan:

- A description of how the agency will achieve 24/7 health officer coverage.
- A description of how these funds will assist the agency in meeting your CHA/CHIP and/or local strategic plan goals. In addition, a description of how the agency will measure/evaluate the impact of FoPH funding.
- A description of how the agency will use FoPH funding to meet equity goals.
- A description of how the agency will use FoPH funding to become, or sustain capacity as, a learning organization including continuous quality improvement and results-based accountability/evaluation.
- Commitment to health officer and health director's participation in RPHO monthly or quarterly convenings as determined by the region and CDPH.

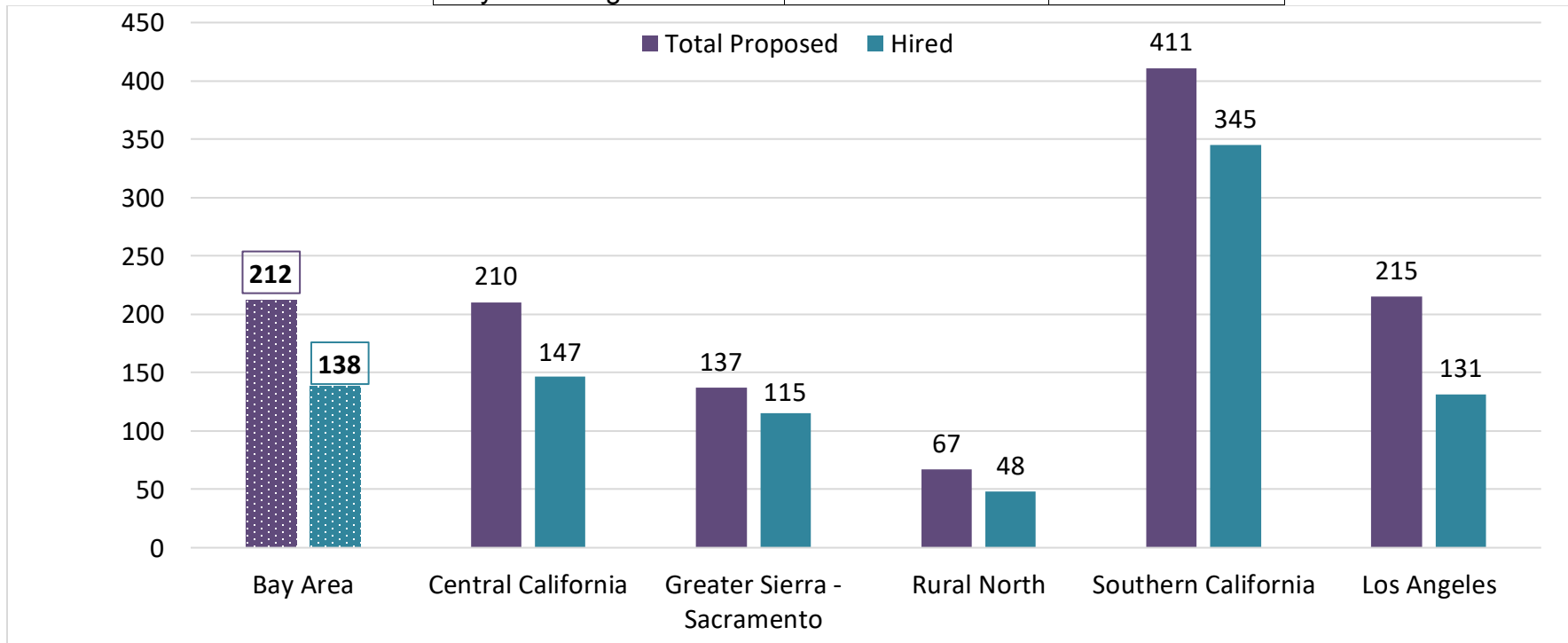
### **Workforce Expansion**

A core pillar of FoPH investment is workforce development, recruitment, and training. Funding offers a unique opportunity to strengthen and expand the local public health workforce. To build public health capacity and increase the LHJ's ability to recruit, retain, and develop a diverse workforce, each LHJ must establish hiring goals. The personnel plan allows for LHJs to project the number of planned hires using FoPH funds.

### Personnel Plan Summary (Figure 1)

Figure 1 indicates the proportion of FoPH positions that have been proposed for recruitment in the Bay Area region on the FoPH work and spend plans and displays the progress on hiring. For FY 2022-23, FoPH efforts were focused on hiring and building infrastructure capacity, thus it is expected that a higher proportion of hiring activity may be indicated during this timeframe. For context, the total proposed and hiring progress statewide and by region has been provided. 65% of Bay Area's FoPH funded positions have been hired as of October 30, 2023.

	Total Proposed	Hiring Progress
Statewide	1253	919
Bay Area Region	212	138

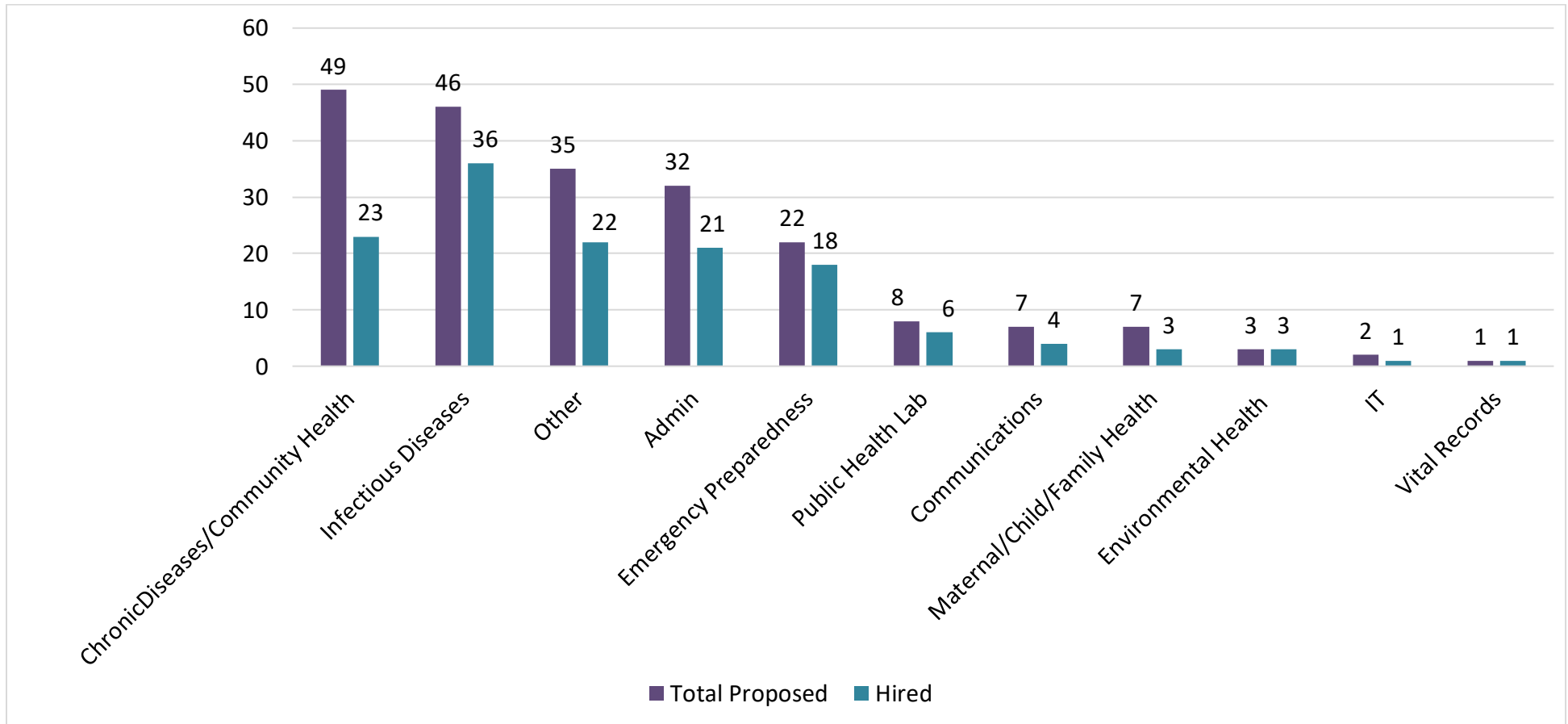


Data Source Figure 1: FoPH Spend Plans provided by LHJs

*Footnote: The position data in this graph reflects total permanent positions and not full-time equivalent (FTE).*

## Staff Position Titles and Program Area Summary (Figure 2)

Figure 2 shows the top three program areas indicated by LHJs for recruitment and hiring staffing the Bay Area region: Chronic Disease/Community Health, Infectious Disease, and Other. While these are the top three planned areas for recruitment among Bay Area LHJs, there has been hiring progress in other areas. The top three program areas with the highest percentage of staff hired include: Emergency Preparedness, Environmental Health, Vital Records. The program area with the lowest proportion of hired staff is Maternal, Child and Family Health.



Data Source Figure 2: FoPH Spend Plans provided by LHJs

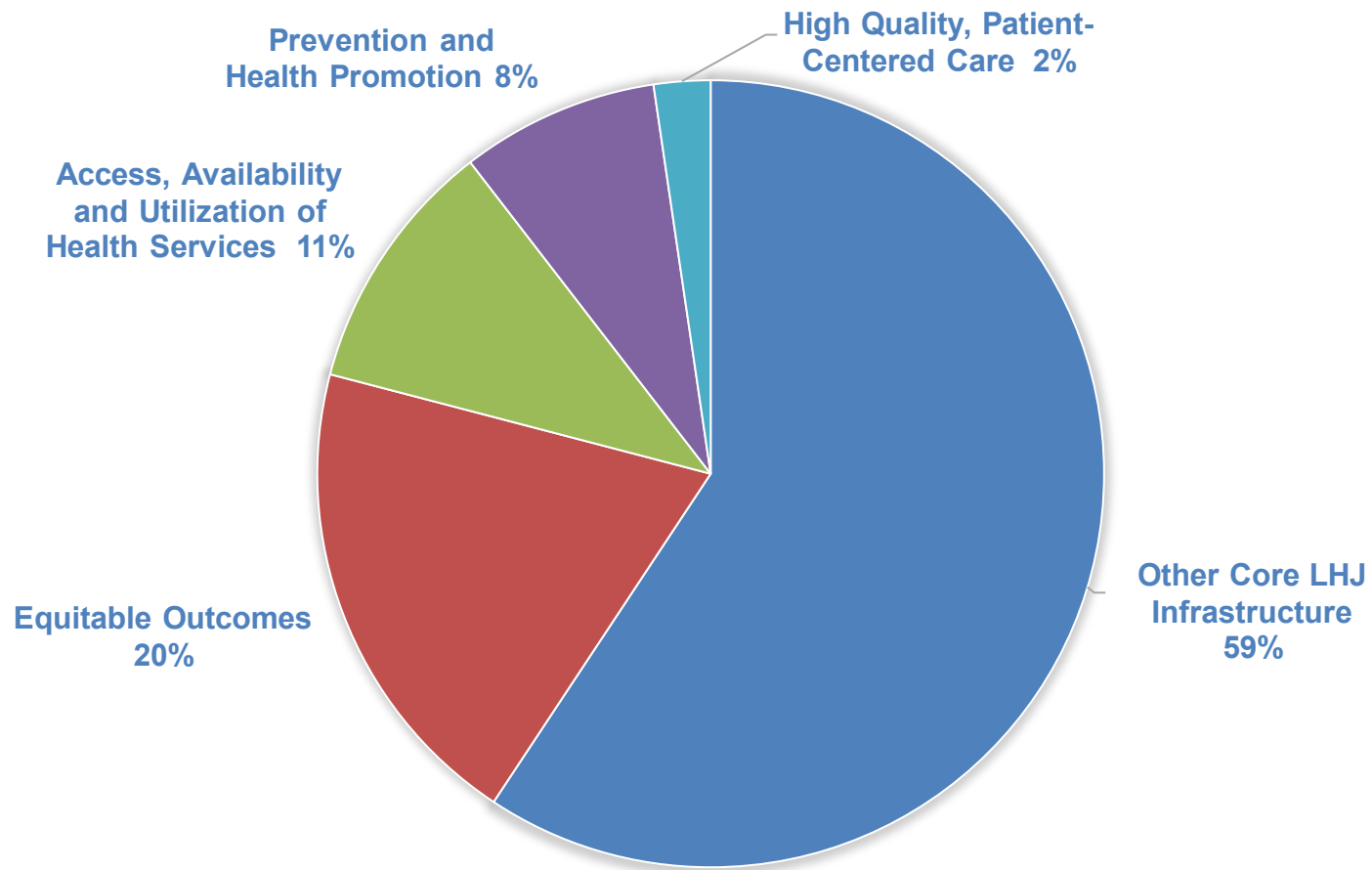
*Footnote: The position data in this graph reflects total permanent positions and not FTE.*

### Issue Area Themes (Figure 3)

The top issue area themes identified across the Bay Area region are documented in the table below by total number of issue areas reported among all LHJs in the region and total percentage of reported themes. The top five issue areas identified (Figure 3) across the Bay Area region are: 1) other core LHJ infrastructure; 2) equitable outcomes; 3) access, availability, and utilization of healthcare services; 4) prevention and health promotion; and 5) high-quality, patient-centered care.

Bay Area Issue Area Summary	Total Number	Percentage
Other Core LHJ Infrastructure	51	54%
Equitable Outcomes	17	18%
Access, Availability and Utilization of Health Services	9	10%
Prevention and Health Promotion	7	7%
High Quality, Patient-Centered Care	2	2%
Neighborhood Safety and Collective Efficacy	2	2%
Prevention and Health Promotion Focus: Other	2	2%
Early Childhood Development and Resiliency	1	1%
Environmental Quality and Climate Change	1	1%
Healthy Aging	1	1%
Maternal and Infant Health	1	1%

### TOP ISSUE AREAS THEMES (FIGURE 3)



Data Source Figure 3: FoPH Spend Plans provided by LHJs

*Footnote: The percentages reflected in this pie chart differs slightly from the percentages in the table above as some issue areas have been excluded from the graph.*

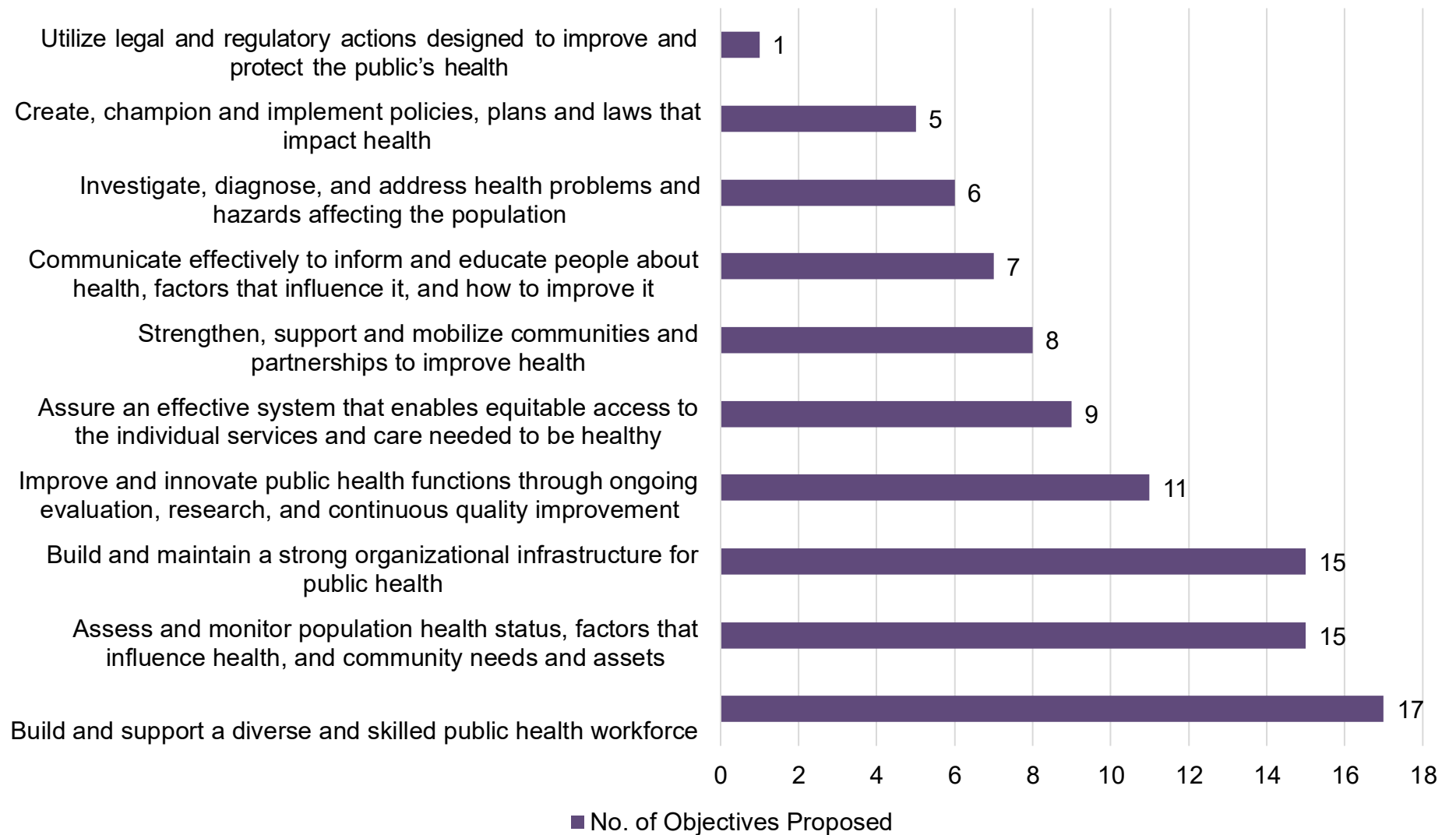
### **Work Plan Objective Themes (Figure 4)**

The work plan objectives reported by the LHJs in the Bay Area region were analyzed by the primary Strategy Areas. The figure below quantifies the total number of objectives proposed in each Strategy Area in the FY 2023-26 work plans across the region.

Additionally, a qualitative analysis was performed to identify common themes across objectives. The Bay Area region is set to improve public health outcomes through the following objective themes:

- Development of workforce through recruiting, developing, and retaining a skilled workforce, emphasizing efficiency, resilience, cross-training and the capability to address evolving public health challenges.
- Strengthening quality improvement and efficient department-wide operations, underscoring the importance of a well-organized and efficient public health system.
- Execute the development and update of CHA, CHIP and county strategic plans in coordination with community partners.
- Improving emergency preparedness, response capabilities, and cross-program planning, highlighting a commitment to adaptability to ensure comprehensive health strategies.
- Expanding the capacity to deliver equitable and high-quality public health services, indicating a dedication to addressing disparities and ensuring access to care for all community members.

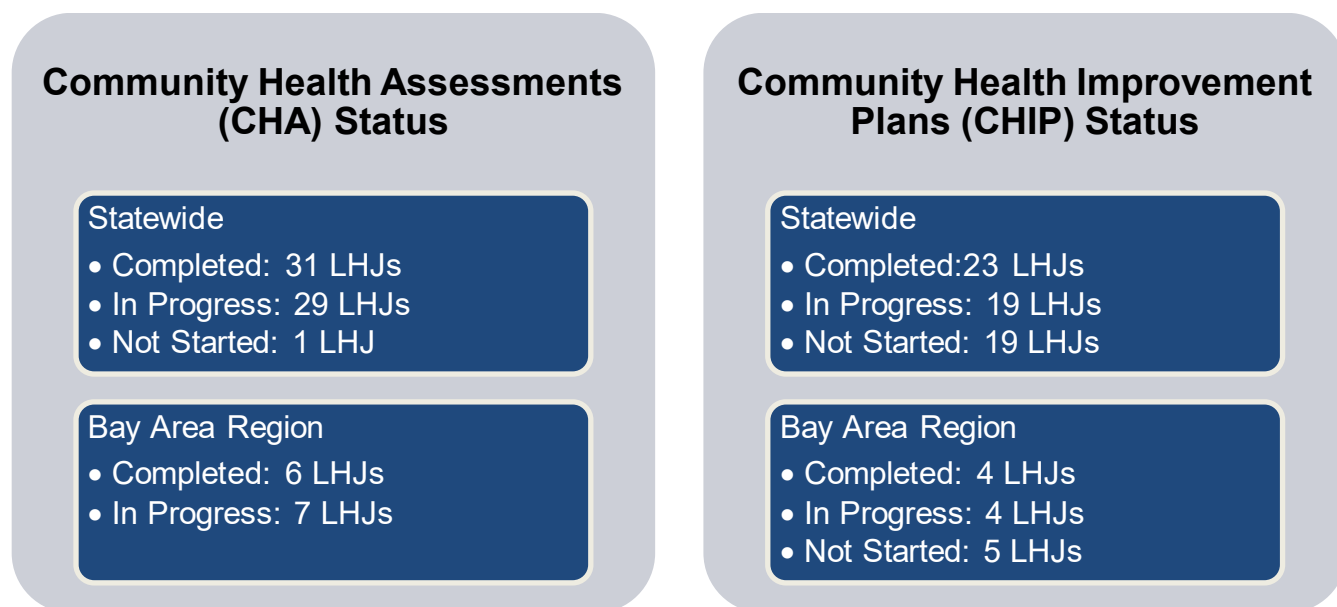
Primary Strategy Areas (Figure 4)



Data Source Figure 4: FoPH Work Plan Strategy Areas provided by LHJ

## Data Collection and Monitoring

FoPH supports the development of CHAs, CHIPs, and other local public health plans. Completion of CHAs and CHIPs are not required as a condition of FoPH funding however if a CHA/CHIP and/or strategic plan has not been completed, the LHJ is required to begin coordination and planning activities by December 2023. Seven of thirteen LHJs in the Bay Area region indicated they completed a CHA. Additionally, four LHJs in the Bay Area region indicated they have completed a CHIP. In the graphic below, the current status of CHA/CHIP completion and progress is displayed both from the statewide perspective as well as for the entire Bay Area region.



## Regional Public Health Department Partnership

An LHJ may, upon submission of a letter of support to CDPH, direct a portion of their funds to another LHJ in support of regional capacity. The letter must provide a description of the regional capability being provided. Currently, no LHJs in the Bay Area region have elected to direct a portion of their funds to any other LHJs during the 2023-24 fiscal year.

## VI. Impact of FoPH Funding

### Testimonials on Impact

*“Napa County has hired its first permanent Infection Preventionist and is able to maintain a point of contact with every congregate care facility in the county. The increased epidemiologist resource has also allowed a deep dive into Napa County’s tuberculosis (TB) and latent tuberculosis infection data to inform our education and outreach strategy to promote TB awareness and increase treatment.”*

*“Post pandemic, we have utilized the FoPH funding to help improve our public health laboratory quality standards to meet regulatory compliance, as well as worked on the implementation of newly advanced testing methods to respond faster to emerging threats.”*

## Conclusion

Investing in a modern, innovative public health infrastructure is essential to ensuring the health and well-being of all Californians. The FoPH investments in the proposed capabilities and objectives by the Bay Area region outlined in this memo demonstrates progress in public health infrastructure. The Bay Area region has made significant progress in developing a diverse multi-disciplinary public health workforce through increasing permanent staffing in the areas of IT, Communications, and Chronic Disease/Community Health.

The Bay Area region exhibits a commitment to advancing core community health standards with FoPH funds for the development of CHA, CHIP, and public health accreditation efforts. The FoPH 2023-24 work plans and spend plans for the Bay Area region will begin the process of transforming our public health landscape and accelerating our progress towards a 21st century public health system.

**Contact:** For questions to CDPH related to this summary, contact [RPHOadmin@cdph.ca.gov](mailto:RPHOadmin@cdph.ca.gov).

LHJ Website
<a href="#">Alameda</a>
<a href="#">Berkeley</a>
<a href="#">Contra Costa</a>
<a href="#">Marin</a>
<a href="#">Monterey</a>
<a href="#">Napa</a>
<a href="#">San Benito</a>
<a href="#">San Francisco</a>
<a href="#">San Mateo</a>
<a href="#">Santa Clara</a>
<a href="#">Santa Cruz</a>
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<a href="#">Sonoma</a>

Sincerely,  
Caroline Kurtz, PhD  
Deputy Director  
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California Department of Public Health