

# Mission

To protect health, prevent disease and injury, and promote health and well-being for everyone in the County.

## Mandatory & Major Duties

- Assess and monitor population health
- Investigate, diagnose, and address health hazards and root causes
- Ensure equitable distribution of health affirming resources
- Implement policies, plans, and practices that reduce inequities in health
- Identify and resolve barriers to good health that affect those most vulnerable
- Utilize legal and regulatory actions to enhance and protect population health
- Build and support a diverse and skilled workforce and a just workplace
- Build and maintain a strong organizational infrastructure for public health
- Strengthen collaborations with community partners to build equity and justice
- Improve and innovate through evaluation, research, and quality improvement

# Department Strategic Plan Exists?



Strategic Plan 2018-2023 📎 (rev July 2019)

#### 2024-25 Budget (\$Thousands)

As of Supplemental Budget Phase

| EXPENDITURES/APPROPRIATIONS               |                            |
|---|----------------------------|
| Total Salaries & Employee Benefits        | \$<br>923,160              |
| Total Services & Supplies                 | \$<br>822,433              |
| Other Charges                             | 34,941                     |
| Cap Assets – Equip                        | 3,600                      |
| Other Financing Uses                      | -                          |
|   |                            |
| TOTAL GROSS APPROP                        | \$<br>1,784,134            |
| TOTAL GROSS APPROP<br>Intrafund Transfers | \$<br>1,784,134<br>114,056 |
|   | \$<br>                     |
| Intrafund Transfers                       | <br>114,056                |
| Intrafund Transfers<br>TOTAL NET APPROP   | <br>114,056<br>1,670,078   |



2025-26 Department Budget Presentation Summary

# **Department Budget Request: Budget Priorities**

Listed in order of priority, Amounts in \$Thousands



| # | Request Title/Short Descriptor           | Fund<br>Source | Gross<br>Approp | less<br>IFT | less<br><b>Revenue</b> | = NCC       | Position<br>Change | Board Priority          | Directed<br>By | Metrics<br>Plan? |
|---|--|----------------|-----------------|-------------|------------------------|-------------|--------------------|-------------------------|----------------|------------------|
| 1 | nvironmental Health                      | RO             | 3,173           | -           | 3,173                  | -           | 17.0               | Environmental<br>Health | n/a            | Ν                |
| 2 | Substance Abuse Prevention & Control     | RO             | 164,625         | -           | 164,625                | -           | 37.0               | #N/A                    | n/a            | Ν                |
| 3 | Health Facilities Inspection             | RO             | 11,071          | -           | 11,071                 | -           | 5.0                | #N/A                    | n/a            | Ν                |
| 4 | Maternal, Child & Adolescent Health      | RO             | 189             | -           | 189                    | -           |                    | Child Protection        | n/a            | Ν                |
| 5 | Office of Workers' Health and Safety     | RO             | -               | -           | -                      | -           | 1.0                | #N/A                    | n/a            | Ν                |
| 6 | thildren's Medical Services              | RO             | 384             | -           | 384                    | -           | 2.0                | Child Protection        | n/a            | Ν                |
| 7 | Acute Communicable Disease Control       | RO             | 3,135           | -           | 3,135                  | -           | 2.0                | #N/A                    | n/a            | Ν                |
| 8 | Chronic Disease and Injury<br>Prevention | RO             | 800             | -           | 800                    | -           |                    | #N/A                    | n/a            | Ν                |
| * | 🍿 Other Ministerial Changes              |                | (103,456)       | (15,986)    | (44,699)               | (42,771)    | 1.0                | #N/A                    | n/a            | N                |
|   | TOTAL                                    |                | \$ 79,921       | \$ (15,986) | \$ 138,678             | \$ (42,771) | 65.0               |                         |                |                  |

# **TOTAL BUDGET REQUEST FOR 2025-26 RECOMMENDED BUDGET PHASE (\$Thousands)**

\$138,678





Funding Source RO: Revenue Offset | NCC: Net County Cost Change | AFB: Available Fund Balance | DAFB: Department Available Fund Balance | CO: Carryover | Other - SBI: State Budget Impact



2025-26 Department Budget Presentation Summary Department Budget Request: Unmet Needs Amounts in \$Thousands

| #       | Unmet Need   | Approp |        | IFT |   | Revenue |   | NCC |        | Positions |
|---------|--|--------|--------|-----|---|---------|---|-----|--------|-----------|
| Tier    | I: Critical Unmet Needs  |        |        |     |   |         |   |     |        |           |
| ]       | Trans, Gender Expansive, and Intersex (TGI) Wellness and Equity Initiative | \$     | 3,500  | \$  | - | \$      | - | \$  | 3,500  | -         |
| 2       | LA County's Gender Impact Assessment (GIA) Implementation                  | \$     | 125    | \$  | - | \$      | - | \$  | 125    | -         |
| 3       | Prioritizing Gender-Based Violence Prevention in LA County                 | \$     | 1,650  | \$  | - | \$      | - | \$  | 1,650  | -         |
| 4       | 4 Domestic Violence Services for All Program (DVSFA)                       |        | 2,934  | \$  | - | \$      | - | \$  | 2,934  | 2.0       |
| 5       | 5 Addressing Hepatitis C in LA County                                      |        | 441    | \$  | - | \$      | - | \$  | 441    | 2.0       |
| 6       | 6 Establishing a Safe Maximum Temperature Threshold for Residential Units  |        | 549    | \$  | - | \$      | - | \$  | 549    | -         |
| Tier    | 2: Priority Unmet Needs  |        |        |     |   |         |   |     |        |           |
| 7       | Office of Worker Health & Safety (OWHS)                                    | \$     | 426    | \$  | - | \$      | - | \$  | 426    | 2.0       |
| 8       | 8 Reducing Medical Debt  |        | 445    | \$  | - | \$      | - | \$  | 445    | 2.0       |
| 9       | Tuberculosis Control Program (TBCP)  | \$     | 233    | \$  | - | \$      | - | \$  | 233    | 2.0       |
| 10      | Free Gun Locks - Firearm Safety Initiative                                 | \$     | 1,956  | \$  | - | \$      | - | \$  | 1,956  | 2.0       |
| 11      | Domestic Violence Housing & Support Services (DVHSS)                       | \$     | 165    | \$  | - | \$      | _ | \$  | 165    | 1.0       |
| Tier 3: | Other Unmet Needs  |        |        |     |   |         |   |     |        |           |
| 12      | Chronic Disease and Injury Prevention (CDIP)                               | \$     | 253    | \$  | - | \$      | - | \$  | 253    | 1.0       |
| 13      | Centralized Access System for Domestic Violence Services                   | \$     | 971    | \$  | - | \$      | - | \$  | 971    | -         |
|         | TOTAL UNMET NEEDS  | \$     | 13,648 | \$  | - | \$      | - | \$  | 13,648 | 14.0      |



# **Tiering Definitions**

## **TIER 1: Critical Unmet Needs**

Requests where, if unfunded in the upcoming budget year, a department would be prevented from meeting mandatory obligations imposed by settlement, contract, audit finding, new legislation, Board mandate, or imminently cause a health or safety risk.

Detailed justification for critical unmet needs must be included in a department's budget requests submission.

# **TIER 2: Priority Unmet Needs**

Requests where, if unfunded in the upcoming budget year, a department would be prevented from establishing, maintaining or enhancing programs and services having a close nexus to the department's statutory obligation(s) and/or core mission.

Detailed justification for priority unmet needs must be included in a department's budget requests submission.

# **TIER 3: Other Unmet Needs**

Requests that do not meet the criteria in either category above. Other Unmet Needs include requests that are not characterized by urgency but are included to establish a record of the request (whether submitted with or without justification) or to signal a current intent to submit the request in one of the two prior categories in a future budget phase. Requests in this category are not limited to requests funded by NCC.

Documentation for these requests does not need to be included in a department's budget requests submission.



| Budget Challenge/Pressure   | Source   | Impact Summary   |
|---|----------|--|
| Potential Significant Reduction to Federal<br>Funding   | External | 75% of the Department's proposed \$1.77B Recommended Budget for FY25-26 is ascribed to anticipated<br>is associated with funding received directly from the federal government and 34% with the State, (of wh<br>we have not yet received official notice from the federal government about specific reductions to currer<br>budget proposals, and executive orders indicate a policy and resource shift away from many public heal<br>administration would result in a significant reduction in federal support that would have a damaging im<br>serve the residents of Los Angeles County.   |
| Increased Cost of Operations  | External | State and federal grants, which comprise most of the public health budget, have not kept pace with infl<br>continue to implement efficiency measures and explore revenue generating opportunities , there is incr<br>support increased costs, with finite grant funding. Not filling essential vacancies has resulted in curtailn<br>across public health programs.  |
| Fee Schedule for the Environmental<br>Health Division Does Not Reflect Cost of<br>Services                                  | External | DPH has not updated the fee schedule that supports core Environmental Health functions since 2018.<br>Through process changes and the application of new technologies, the costs of the operations continue<br>coming months, we will need Board support for the adoption of an updated fee schedule to address the  |
| Need for a Sustainable Source of Flexible<br>Funds to Respond to Emergency<br>Responses and the Impact of Climate<br>Change | External | DPH continues to face budget pressures from its response to a wide variety of public health and other lo<br>department has responded to large scale disease outbreaks (e.g., COVID-19, MPox, STIs, Hepatitis A), dan<br>stone), environmental hazards (Dominquez Channel, Chiquita Canyon), and most recently, the wildfires<br>flexible funding is needed to augment DPH capabilities on an accelerated timeline. Almost all the gran-<br>used to offset costs associated with specific emergency response activities. Currently, there is a need for<br>easily access for public health emergencies to avoid delays that impact health and safety. |

| • | Anticipated | Wildfire | Recovery | Impacts |
|---|-------------|----------|----------|---------|
|---|-------------|----------|----------|---------|

External

The Department expects to incur costs related to wildfire recovery efforts including expedited plan check review and permitting services at each of the County One-Stop locations and technical assistance on health and safety matters to impacted residents.



ed federal and state funding sources. Of this funding, 41% which approximately 40% is federally sourced). Although rent programs and services, recent announcements, ealth priorities. The proposals contemplated by the new impact on DPH's operations and our ability to effectively

nflation and County COLA and benefit increases. While we acreasing pressure on the department t's budget to ilment of services, and this impact is unevenly distributed

. While the Department has improved efficiencies ue to exceed available revenue from the fees. In the the current revenue gap.

r local emergencies. In the last five years alone, the langerous workplace exposures (bird flu, engineered es that have devastated communities. For each response, ant funding received by DPH is restricted and cannot be for a sustainable dedicated funding source that DPH can