



**PUBLIC REQUEST TO ADDRESS
THE BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES, CALIFORNIA**

MEMBERS OF THE BOARD

HILDA L. SOLIS
HOLLY J. MITCHELL
LINDSEY P. HORVATH
JANICE HAHN
KATHRYN BARGER

Correspondence Received

			The following individuals submitted comments on agenda item:	
Agenda #	Relate To	Position	Name	Comments
9.		Favor	Darryn A Harris	<p>Re: Agenda Item 9 – Support for \$5 Million One-Time Supplemental Budget Funding for the Department of Public Health</p> <p>Dear Chair Barger and Supervisors Solis, Mitchell, Horvath, and Hahn:</p> <p>On behalf of St. John's Community Health, I urge the Board to approve Agenda Item 9 and support the \$5 million in one-time supplemental funding for the Los Angeles County Department of Public Health (DPH). We also encourage the Board to prioritize identifying the full \$20 million needed to strengthen the County's Public Health Emergency Reserves Fund.</p> <p>As one of the largest Federally Qualified Health Centers in Los Angeles, St. John's provides care to tens of thousands of low-income and medically underserved residents across Supervisorial Districts 1, 2, and 4. Our patients rely not just on primary care but also on the essential public health programs and infrastructure overseen by DPH.</p> <p>Here's why this funding matters:</p> <p>1. Protecting the Safety Net DPH's core functions—infectious disease surveillance, community immunization, emergency preparedness—are under-resourced. The \$5 million allocation would help prevent cutbacks to these foundational services at a time when the need remains high.</p> <p>2. Addressing Unmet Community Needs The Board motion recognizes the urgency of "critical level unmet needs." These include chronic disease management in high-need areas, maternal and child health, and culturally tailored health education. Our communities are facing alarming rates of diabetes, hypertension, obesity, and maternal health disparities. Investment now prevents more costly interventions later.</p> <p>3. Advancing Health Equity St. John's clinics are located in areas with high rates of poverty, environmental stressors, and preventable illness. This funding would help sustain mobile outreach, hotline services, and community-based interventions that are proven tools in addressing persistent inequities across neighborhoods.</p> <p>4. Strengthening Emergency Readiness COVID-19 revealed how deeply underfunded public health infrastructure slows rapid, equitable response. This supplemental funding would bolster DPH's readiness—ensuring adequate staffing, lab and data capacity, and preparedness plans to respond to future public health emergencies.</p>



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	<p>5. Commitment to Full Funding While we appreciate the \$5 million allocation, the full \$20 million is necessary to maintain critical operations and avoid delayed responses when future crises arise. This is not just a budget decision—it is a question of public health resilience and community protection.</p> <p>6. Leveraging Existing Resources We encourage the Board and Chief Executive Office to consider using unspent departmental reserves, lapsing funds, or other flexible sources—such as Measure B or County General Funds—to meet the full \$20 million goal.</p> <p>Thank you for your leadership and continued commitment to building a stronger, more equitable public health system for all Angelenos.</p> <p>Sincerely, Darryn Harris Chief Government Affairs & Community Relations Officer St. John's Community Health</p>
Jessica Romo	<p>The recent recommendation by Supervisors Mitchell and Horvath for a \$5 million one-time payment to the Department of Public Health (DPH), coupled with the establishment of a \$20 million County Public Health Emergencies Reserve Fund, represents a crucial investment in our community's health infrastructure. As we face an era of federal funding uncertainty and emerging public health challenges, the Community Public Health Trust (CPHT) stands as a beacon of transformative work that demands our continued support and expansion. As federal resources dwindle, local communities must step forward to fill these gaps. The alternative, allowing essential public health services to deteriorate, would result in far greater costs, both human and financial, in the years ahead.</p> <p>CPHT's remarkable work in transforming trauma into empowerment, building community capacity, and addressing social determinants of health demonstrates the power of community-based approaches to create lasting change. The act of visiting 8k households to give specialized care and attention to the highest need communities has literally saved lives! The commitment to interconnectedness, authenticity, and evidence-informed practice provides a model for how public investment can generate maximum community benefit.</p> <p>The time for this investment is now. Every day of delay means missed opportunities to prevent illness, reduce healthcare costs, and build community capacity. Every dollar invested in proven community-based approaches like CPHT's generates multiple dollars in savings while creating immeasurable improvements in community wellbeing.</p> <p>The Supervisors' recommendation represents a crucial step toward building a more resilient, equitable, and healthy community. Supporting CPHTs through this funding ensures that our public health infrastructure remains strong,</p>



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	<p>responsive, and community-centered, regardless of federal funding fluctuations or emerging challenges.</p> <p>This investment in CPHT is ultimately an investment in our community's future—a future where all individuals and families can thrive with strength, dignity, and hope.</p>
Joanne Preece	<p>The Community Clinic Association of Los Angeles County (CCALAC), representing 66 nonprofit community health center organizations, strongly supports the motion by Supervisors Mitchell and Horvath to preserve the County's public health infrastructure in the face of severe federal funding reductions. With our public health infrastructure under threat from federal funding cuts, we must act now to protect core services—including HIV prevention—from being dismantled.</p> <p>The cancellation of funding for 39 HIV and STD prevention contracts—including 16 held by community health centers—has already disrupted access to critical services such as HIV/STI testing, PrEP and PEP, and harm reduction. These services are not fully reimbursable through Medi-Cal, and community health centers cannot absorb the funding gap. Without action, Los Angeles County risks a surge in HIV infections and a deepening of existing health inequities.</p> <p>The motion's proposal to allocate \$5 million in one-time bridge funding is a critical first step to sustain essential prevention programs while longer-term state and federal support is pursued. In addition, the creation of a \$20 million Public Health Emergencies Reserve would help ensure the County can respond swiftly to future public health crises, especially when state or federal funding falls short. These actions are essential to stabilizing the Department of Public Health and protecting the well-being of over 10 million County residents.</p> <p>Thank you for your leadership and for recognizing the urgency of these important issues.</p>
Julie Leyba	<p>Hello Board of Supervisors.</p> <p>My name is Julie Leyba, and I am speaking on behalf of Northeast Valley Health Corporation. I strongly support the motion to sustain Los Angeles County's Public Health System, specifically the urgent need for \$5 million in one-time funding for public safety and the establishment of a \$20 million Emergency Reserve Fund.</p> <p>We are all aware of the difficult challenges facing our public health system, which is under attack. We must dedicate funds to protect vital services, like HIV prevention, from being eliminated, as failure to do so would pose serious risks to public health and safety.</p> <p>This bridge funding is critical, especially as we grow increasingly concerned about uncertainties in federal and, particularly, state funding. We call on the</p>

				<p>Board to support this temporary bridge funding so community-based organizations working to end the HIV epidemic can continue serving our communities without interruption.</p> <p>Thank you for your time and consideration.</p>
			Rebecca Ruiz	<p>My name is Rebecca Ruiz, pronouns she/her and I am the Clinic Manager for The LGBTQ Center Long Beach. I am in strong support of the motion Supporting Los Angeles County's Public Health System. With our public health system under attack, we must dedicate funds to protect services like HIV prevention from being obliterated. This bridge funding is critical as we become increasingly confident in federal and, in particular, state funding. We are calling on the Board to support temporary bridge funding so that our community-based organizations stopping the HIV epidemic can continue to operate and serve our communities. Thank you.</p>
			Sejal Patel	See submitted Public Comment Letter dated June 13, 2025.
		Item Total	6	
Grand Total			6	



June 13, 2025

Los Angeles County Board of Supervisors
Kenneth Hahn Hall of Administration
500 West Temple Street, Room 383
Los Angeles, CA 90012

Re: Agenda Item 9 – Support for \$5 Million One-Time Supplemental Budget Funding for the Department of Public Health

Dear Chair Barger and Supervisors Solis, Mitchell, Horvath, and Hahn:

On behalf of Rising Communities, a coalition dedicated to advancing health equity across Los Angeles County's most underserved neighborhoods, I respectfully urge the Board to approve Agenda Item 9 in full. We strongly support the allocation of \$5 million in one-time supplemental funding for the Department of Public Health (DPH) and also encourage the Board to work urgently to identify an additional \$20 million for the County Public Health Emergency Reserves Fund.

Why this funding is critical:

1. Safety Net Preservation

DPH's foundational programs—such as infectious disease surveillance, community immunizations, and emergency response—are under-resourced. A \$5 million infusion would help prevent disruptive cutbacks in these vital services.

2. Addressing Unmet Needs

Item 9 acknowledges "critical level unmet needs." These include chronic disease management in low-income areas, maternal and child health services, and culturally competent public education. Our communities face rising rates of diabetes, obesity, hypertension, and maternal health disparities that demand continued support.

3. Improving Equity Across Districts

Rising Communities serves residents in the 1st, 2nd, and 4th Supervisorial Districts—areas with limited access to healthcare facilities, higher rates of environmental stressors, and lower-life expectancy. This funding would directly support ongoing mobile clinics, outreach efforts, and hotline services in these high-need neighborhoods.

4. Preparing for Future Public Health Crises

The COVID-19 pandemic underscored how underfunded public health infrastructure hurts our ability to respond quickly. This appropriation will bolster readiness—staffing, lab capacity, data systems—in case of future outbreaks or disasters.

5. Commitment to the Full \$20 Million

While we are encouraged by the proposed \$5 million allocation, we urge the Board to make a sustained commitment to identifying the \$20 million in emergency reserves. DPH's ability to maintain critical staffing, data infrastructure, and emergency operations cannot be deferred. This is an investment in long-term health resilience and system-wide equity.

6. Leveraging Existing Resources and Unspent Funds

We encourage the Board to work with the Chief Executive Office to explore unspent funds from departmental reserves, lapsing funds, or other flexible revenue sources—such as Measure B or County General Funds—to reach the full \$20 million needed.

Thank you for your leadership and consideration.

Sincerely,

A handwritten signature in cursive script that reads "Sejal Patel".

Sejal Patel
Executive Director, RC Foundation
Rising Communities
spatel@risingcommunities.org