The Public Health Alliance of Southern California (Public Health Alliance) 2023 Policy Platform outlines important and timely regional, state, and federal policy opportunities that can create transformative changes in our communities. The platform builds off of the 2022 Policy Platform and identifies new and emerging policies that have arisen in the past year, as well as new legislation and budget proposals for the 2023 session. This includes increasing resources and investments in local health jurisdictions; elevating health equity, prevention, and upstream social drivers of health approaches across sectors; ensuring an equitable and just COVID-19 recovery; and other priorities that are aligned with our 2019-2024 Strategic Plan. We will use our resources to both accelerate paradigm shifts in public health practice, and mobilize power for healthier, sustainable and just communities. Together as a regional coalition, the Public Health Alliance aims to establish a legacy of enduring health equity across Southern California. The 2019-2024 Strategic Plan identifies key strategies that work in concert to achieve the vision of vibrant and activated communities achieving health, justice, and opportunities for all. Policy opportunities are organized according to how they will work to advance the goals laid out in the strategic plan. Unless specified, all non-legislative items include engagement at the local, state and/or federal level, as appropriate. The Public Health Alliance Charter also allows us to take actions on policy items supported by the County Health Executives Association of California (CHEAC) and the Health Officers Association of California (HOAC)/California Conference of Local Health Officers (CCLHO) without prior Leadership Council approval. Policy opportunities closely aligned with the Public Health Alliance strategic plan are included in the platform. Policies included below are either supported by or not tracked by CHEAC/HOAC * and are supported or watched by the California State Association of Counties (CSAC) **.

**PUBLIC HEALTH ALLIANCE KEY STRATEGIES FROM 2019-2024 STRATEGIC PLAN**

### ADVANCE HEALTH EQUITY
Everyone should have the opportunity and resources to live a healthy life. The Alliance positively contributes to a fair, just, inclusive, equitable, and sustainable future for all.

### CHAMPION PREVENTION FUNDING
Everyone should live in a place with adequate public health infrastructure to protect and promote community health and well-being. The Alliance advocates for sustainable local public health funding and innovative funding opportunities for community health investments.

### PROMOTE POWERFUL, HEALTHY, RESILIENT COMMUNITIES
Everyone should live in a place that offers them the opportunity and ability to lead their healthiest lives. The Alliance advances equitable policies such as economic wellbeing, nutritious food, active transportation, clean water, and affordable housing.

### ELEVATE THE CLIMATE + HEALTH NEXUS
Everyone should be protected from the health impacts of climate change. The Alliance works to address the public health and equity nexus with climate change adaptation, mitigation, and recovery efforts.

### TRANSFORM DATA INTO ACTION
Everyone should have access to timely, accurate, and relevant data for their community. The Alliance makes high-quality social drivers of health data available and actionable for all advocates working to improve community conditions.
The Public Health Alliance will support policy actions that meet the general criteria outlined within each of the strategies plan areas, as well as specific legislation and budget requests included below.

**ADVANCE HEALTH EQUITY**

**General Policies**

» Support increased resources for local health jurisdictions to advance health equity and racial justice, including, but not limited to, funding to expand and sustain equity teams, and creating plans that advance health equity and racial justice in local health jurisdictions (LHJs).

» Support efforts to integrate social drivers of health (SDOH) into state and federal funding, policies, department priorities and healthcare.

» Support funding and policy efforts that aim to embed equity into all emergency response structures, recovery planning, and implementation processes for all types of shocks and stressors, including communicable diseases and climate-related emergencies.

» Support funding and policy efforts that aim to support local health jurisdictions community partnerships for robust equity solutions.

» Support efforts that aim to reduce maternal and infant deaths and improve the patient experience for families that have been most impacted by social inequities (i.e., Black and Indigenous women and birthing people).

» Support community-informed policy and funding efforts that aim to improve health outcomes for Black, Indigenous and other People of Color (BIPOC).

» Support efforts to increase equitable health access, such as reforming Medi-Cal, including CalAIM and managed care plan contracting and procurement

**Specific Policies**

» **AB 85** – Requires a health care services plan contract or health insurance policy to include coverage for screenings for social determinants of health, and provide physicians with adequate access to community health workers, peer support specialists, lay health workers, and other community health representatives

» **AB 1701** – Expands the definition of local health jurisdictions eligible to apply for the California Perinatal Equity Initiative (PEI) to include a city or city and county.

» **AB 1079** – Requires the California Department of Public Health to establish a Hate Crimes Intervention Unit to implement research-based community interventions in communities where a hate crime has been confirmed.

» **SB 299** – Promotes health equity by removing loss-of-contact, based on returned mail, as a reason for issuing a redetermination of eligibility for Medi-Cal beneficiaries.

**CHAMPION PREVENTION FUNDING**

**General Policies**

» Support proposals to increase funding for local health jurisdictions.

» Support efforts to increase investments in local health jurisdictions from health care funding streams, including CalAIM and cost containment initiatives.

» Support efforts to increase investments from multiple sectors that are aligned and coordinated with local health jurisdictions

» Support efforts to recruit and retain the public health workforce and create an equitable and diverse workforce pipelines that protect and bolster the workforce of the public health field and professionals.

» Support strategies that address workforce chronic stress, trauma and burnout

» Support efforts to protect public health officials from threats, harassment and violence and support them in preserving public health authority.

**Specific Policies**

» **AB 1057** – Establish the California Home Visiting Program, within the Health and Safety Code, which would be a voluntary program under which the State Department of Public Health provides funds to local health departments to support pregnant people and families with young children

* CHEAC supports
** CSAC watching (Alliance will remove in the event CSAC opposes)
FOOD SECURITY & JUST AND RESILIENT FOOD SYSTEM

General Policies
» Support upstream efforts that increase resources and provide policy opportunities that promote intergenerational and community food security and a just and resilient food system.
» Support local, state and federal funding and policy efforts that aim to expand access to resources needed to meet immediate social needs during emergencies.
» Support local, state, and federal funding and policy efforts that prioritize investments and resource allocation aimed at strengthening community resilience to public health and climate emergencies.

Specific Policies
» AB 311*, ** & SB 245*, ** – Expands CalFresh benefits to all individuals eligible for the program if the individual’s immigration status is the sole basis for their ineligibility for the benefits.
» SB 600*, ** – Establishes the CalFresh Minimum Nutrition Benefit (MNB) Program to provide additional state-funded CalFresh nutrition benefits to ensure all CalFresh households receive a minimum monthly benefit of fifty dollars.
» AB 274** – Exempts any grant, award, scholarship, loan, or fellowship benefit provided to any assistance for educational purposes from consideration as income for purposes of determining CalWORKs eligibility or grant amounts.
» AB 712** – Requires the State Department of Social Services to seek all available federal waivers and approvals to maximize food choices for CalFresh recipients, including hot and prepared foods ready for immediate consumption.

ECONOMIC SECURITY, JUSTICE, AND RESILIENCY

General Policies
» Support efforts that improve the economic resilience and security of households, including family supporting wages, and expanded paid sick, family and medical leave.
» Support efforts that enhance financial assistance for unemployed individuals and their families.

Specific Policies
» SB 616** – Increases the number of paid sick leave to employees from three to seven days, increases the cap that employers can place on paid sick days from six to fourteen days and increases the number of paid sick days an employee can roll over to the next year from three to seven days.
» AB 518** – Expands eligibility for benefits under the paid family leave program to include individuals who take time off work to care for a seriously ill designated person.
» AB 575** – Expands family temporary disability insurance benefits to workers who take time off work to bond with a minor child within one year of assuming responsibilities of a child in loco parentis.
» AB 1536** – Expands eligibility for that program to aged, blind, and disabled individuals regardless of immigration status if the individual meets the eligibility criteria for the program and is not eligible solely due to their immigration status.

HOUSING STABILITY & SECURITY

» Support efforts that ensure people can live in quality, stable, safe and affordable housing that is connected to health supportive resources and community.
» Support efforts to enhance infrastructure as supports for people experiencing homelessness, including expanded housing and sheltering options, and dignified hygiene and service provision.

* CHEAC supports
** CSAC watching (Alliance will remove in the event CSAC opposes)
General Policies
» Support efforts that increase resources and provide policy opportunities to integrate health equity and public health infrastructure and coordination within local, state, and federal climate change initiatives.
» Support efforts that increase resources and provide policy opportunities to integrate planning for and responding to the impacts of climate change into public health operations and programs at the state and local level.
» Support increased resources for active transportation (including ATP), transit-oriented affordable housing, green infrastructure, and climate resilient communities.
» Support increased resources to fund for the California Climate Investment Program to advance health equity and reduce greenhouse gas emissions.
» Support efforts that increase resources for community-driven climate mitigation, adaptation, and resilience efforts.
» Support efforts that prioritize front line communities that are most vulnerable to the effects of climate change.

Specific Policies
» **AB 408** – Enacts the Climate-resilient Farms, Sustainable Healthy Food Access, and Farmworker Protection Bond Act of 2024 which, if approved by voters, would authorize the issuance of bonds in the amount of $3.3 billion to finance programs related to agricultural lands, climate resilience, farmworkers, workforce development, and disadvantaged communities.
» **AB 305** – Enacts the California Flood Protection Bond Act of 2024 which, if approved by the voters, would authorize the issuance of bonds in the amount of $4.5 billion for flood protection projects.
» **SB 306** – Codifies the state’s Extreme Heat Action Plan and improves the direct install program in the Equitable Building Decarbonization Program by requiring preference for projects in regions where residents are disproportionately vulnerable to climate impacts.
» **SB 57** – Requires electric, water, and gas utilities to postpone the disconnection of a customer’s residential service for nonpayment of a delinquent account when the temperature will be 32 degrees Fahrenheit or cooler, or 95 degrees Fahrenheit or warmer, during the 24 hours after that service disconnection would occur.
» **SB 262** – Mandates that the State Department of Social Services administer the California Farmworkers Drought and Flood Resilience Pilot Project, providing cash assistance to eligible households with farmworkers to meet their basic needs and ensure their economic security.
» **AB 591** – Require that any publicly available electric vehicle service equipment that is capable of charging a light-duty electric vehicle and is installed or substantially retrofitted, include a universal connector, as defined, and be publicly accessible.

* CHEAC supports
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General Policies

» Support the use of health equity metrics for local, state, and federal decision-making and resource allocation, including for hospitals and health plans.

» Support efforts that increase resources and provide policy opportunities to integrate SDOH and continued and amplified use of the Healthy Places Index (HPI).

» Support integration of local health department stakeholders in state governance to inform the development of data policies, practices, and metrics.

» Support efforts to modernize public health data infrastructure, including: development of data sharing protocols, standardizing data collection practices, and a commitment to transparency in public reporting.

» Support policies and opportunities to develop a unified, bidirectional statewide health information exchange, with interoperability between state and local health departments, and healthcare and hospital systems.

» Support efforts to establish effective, efficient, ethical and equitable data sharing agreements.

» Support the development of modern, flexible public health surveillance systems, including streamlined integration with provider reporting, case investigation, and contact tracing tools.

» Support clear guidance and the development of electronic messaging standards for laboratories and other reporting entities to ensure timely, accurate data collection and interoperability with existing State and LHD data systems.

» Support inclusion of “self-identification” field options for SOGI and race/ethnicity in health care, contact tracing, and other clinical data systems.

» Support efforts to collect and report geographically disaggregated data (sub-county, census tract) and data disaggregated by race/ethnicity, SOGI, people experiencing homelessness, and tribal affiliation.

» Support “community right-to-know” policies that allow for the collection and reporting of granular, spatially-refined and disaggregated data.

» Support development of best practices for protecting confidentiality and preventing re-identification when reporting data on small communities or rare outcomes.

» Support development of best practices for community engaged, culturally-sensitive data collection, communication, and reporting. (Reference Urban Indian Health Institute’s report for an example)

Specific Policies

» AB 1110*, ** – Require the Office of the Surgeon General to review literature on adverse childhood experiences (ACEs) and data disaggregation practices, develop culturally and linguistically competent ACEs screening guidance, and make it accessible to the public until January 1, 2027.

* CHEAC supports
** CSAC watching (Alliance will remove in the event CSAC opposes)

FOR MORE INFORMATION

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