

**FACT SHEET  
SB 162 (ORTIZ)  
SUPPORT**

**SB 162 will**

- Establish a new Department of Public Health within the Health and Human Services Agency, to be under the control of a State Health Officer (Director), to be appointed by the Governor.
- Require the Director to be a physician and have substantial scientific, medical, public health, leadership, and management experience.
- Establish a 13-member Public Health Board to ensure public and expert involvement in public health planning.
- Require that the new department assume the duties, purposes, responsibilities, and jurisdiction currently exercised by DHS, in various program areas (see below).
- Provide a more focused state leadership in the provision of key infectious and chronic disease prevention programs.
- Provide a clear identity for public health in terms of population-based prevention of disease.

**SB 162 will not**

- Take effect until the necessary appropriation is made in the budget act.

**Public Health Experts agree.**

In April, 2003, the Little Hoover Commission (LHC) Report *To Protect and Prevent: Rebuilding California's Public Health System* found that "The State's public health leadership and organizational structure is ill-prepared to fulfill the primary obligation of reducing injury and death from threats that individuals cannot control, such as environmental hazards, bioterrorism, and emerging infectious diseases."

The report also found that "The maturing of the Medi-Cal program has overwhelmed the core public health aspects of the department's mission, and supplanted the scientific-based culture that once existed," and suggested that "The State can address these weaknesses by reorganizing existing programs and resources into a new department focused on public health security." This is exactly what SB 162 will do.

These ideas are echoed in a RAND Report from June, 2004, *Public Health Preparedness in California: Lessons Learned from Seven Health Jurisdictions*, whose major finding was that “Strong, central leadership and coordination of public health appears to be lacking.” Again, it is exactly this kind of leadership proposed in SB 162.

The governor’s own California Performance Review in 2004 recommended that the governor should work with the legislature to consolidate all core public health functions into one newly created organization under a state public health officer.

In June of 2005, the LHC wrote a letter to the governor reiterating the recommendation to “enact legislation to establish a separate department of public health.”

This issue received attention as the lead story in the San Francisco Chronicle on Sunday, July 31, 2005. That article quoted Alameda County Health Officer Dr. Tony Iton: “The status of public health in California has diminished drastically in the past two decades.” The article also quoted San Mateo County Health Officer Dr. Scott Morrow, who said that having DHS manage public health programs is “like having Aetna manage the CDC. They are in the medical insurance business.”

**As currently drafted, the new department would include all of the following:**

- Office of Binational Border Health
- Office of AIDS
- California Conference of Local Health Officers
- Chronic Disease and Injury Control
  - Breast and prostate cancer prevention program
- Communicable Disease Control
- Drinking Water and Environmental Management
- Environmental and Occupational Disease Control
- Food, Drug, and Radiation Safety
  - Sherman Food, Drug, and Cosmetic Act
  - California Uniform Retail Food Facilities Law
- Health Information and Strategic Planning
  - Refugee Health
  - Medically Indigent Services
  - Center for Health Statistics
  - Vital Records
  - County Health Services
- Laboratory Sciences
- Local health department regulations and funding
- Prevention Services
- Primary Care and Family Health
  - Child Health and Disability Program
  - California Children’s Services
  - Family planning
  - Maternal and Child Health
  - WIC

Genetic Disease Branch  
State Laboratories

**DHS would retain the following  
programs:**

Licensing of clinics and other health  
facilities  
Oversight of health care service plans  
California Community Care Facilities Act  
Residential Care Facilities for the Elderly  
Medi-Cal