



# Strengthening Public Health Agencies for Safe and Healthy Communities



## Legislative Overview Series: 2023 Public Health Spotlight

### Introduction

State and territorial health agencies are responsible for keeping the public healthy and safe. The public health workforce must respond quickly to unexpected events with effective legal tools such as public health laws to prevent the spread of disease. Health agency staff regularly exercise public health authority, but especially in times of emergency and disease outbreaks. Years of underinvestment, along with recent limitations of public health authority, tie health agencies' hands and leave them unable to direct and guide the public on how to remain safe during a crisis.<sup>1,2</sup> Ensuring state and territorial health agencies have effective legal powers and a strong public health workforce is necessary for allowing agencies to fulfill their responsibility of protecting and improving the well-being of their communities.

Governments have a duty to sustain health agencies' ability to respond to public health events and protect the public from harm. Despite these obligations, public health legal authority has been limited, or eliminated, in several jurisdictions and the public health workforce made tenuous and fragile. As a result, public health agencies are being asked to fulfill their responsibilities without being given the proper tools to do so.

### Legislative Trends

#### Guaranteeing Legal Authorities to Keep Communities Healthy and Safe

Public health legal authorities allow the temporary, reasoned use of non-medical measures to prevent the spread of infectious disease and keep people safe during emergencies.<sup>3,4,5,6</sup> Nevertheless, many states have restricted or eliminated their health department's ability to use such measures. For example, in New Hampshire and Ohio, the legislature can now end public health emergency orders, even before the crisis is over. These and other limitations can undermine health agencies' expertise and curb their responsibility to protect the public during emergencies and disease outbreaks.

#### Increasing Public Health Workforce Capacity

A strong public health workforce is key to allowing a state or territorial health agency to fulfill its responsibility for keeping the public safe and healthy. The nation's public health workforce devotedly confronted the COVID-19 pandemic, and was met with long workdays, an ever-evolving virus, objections to their duties and actions, and many instances of abuse and threats. The increased demands of the pandemic demonstrate the need to rapidly staff up and improve systems to build and support a strong public health workforce. Understanding the impact of state civil service systems and administrative processes on recruitment and retention, creating workplace flexibilities, and addressing employee stress and burnout can all help to increase public health workforce capacity.<sup>7,8</sup>

Jurisdictions working to strengthen the public health workforce include Oregon, where the state health agency was directed to investigate the challenges faced by the public health workforce and make recommendations for improvements. In California, the state public health officer was recently added to the Interagency Advisory Committee on Apprenticeship. This move can lead to public health students being able to participate in "earn and learn" settings, allowing them compensation for participating in workplace applied learning programs and incentivizing new public health professionals. In Tennessee, a 2021 law will allow qualified nurse aides who were temporarily licensed through Tennessee's COVID-19 emergency staffing measures to be permanently credentialed.

#### Sustaining Public Health Workforce Funding

With the temporary influx of public health funding to address the COVID-19 pandemic, many states and territories are working to identify ways to sustain funding to continue supporting their workforce needs. A new program under the American Rescue Plan Act will soon provide funding to health agencies for critical infrastructure needs, including those related to workforce development.<sup>9</sup>

At the state level, both Montana and Nevada enacted funding-related laws in 2021. Montana’s law created a health advisory commission, staffed by the Montana Department of Public Health and Human Services, that includes a bipartisan group of legislators and executive branch appointees to make recommendations for spending American Rescue Plan Act funding. Nevada’s new law creates a Public Health Resource Office tasked with assessing the unmet needs within public health services, identifying opportunities for additional federal and private funding, and making recommendations for improving coordination to maximize efficiency within the public health system.

## Looking Ahead

During the 2023 state legislative sessions, ASTHO expects some jurisdictions to address issues related to public health authority and the public health workforce. These issues will include:

- Spending federal funds and sustaining recent investments in public health workers.
- Professional licensing requirements to retain and expand the public health workforce.
- Distributing and administering childhood and adult vaccines.
- Determining the process for and scope of public health orders and the use of disease control measures.

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Nearly one-third of the state and local public health workforce (32%) is considering leaving their job in the next year—5% to retire and 27% for other reasons. For many of those considering leaving (39%) the pandemic has played a role in their reasoning.<sup>10</sup>

In several places, the tools to protect the public’s health are being undercut and weakened. A recent survey reveals that 59% of public health executives have felt their public health expertise was undermined or challenged by individuals outside of the health department.<sup>11</sup>

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