





THE PROJECT FOCUSED ON RESOURCES & ENGAGEMENT FROM THE STATE TO LHDs

CDC's Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) provides funds to support public health agencies' infectious disease programs. In March 2024, NACCHO conducted a focus group with five states and one-on-one interviews with four local health departments (LHDs) and two state associations of county and city health officials (SACCHOs) about the ELC funding distribution process and state-LHD collaborations.

VERY FEW LHD PARTICIPANTS HAD RECEIVED CORE ELC FUNDS

State and LHD participants reported several barriers to fund distribution, including:

-  **Funding amounts** available were not substantial enough to distribute to LHDs
-  **Additional restrictions** from the state were placed on the funds for LHDs
-  **Limited engagement opportunities** existed for LHDs to offer input on ELC use
-  **Allocation criteria or priorities** may not have accurately aligned with local needs

“ We just had enough with ELC Core to basically cover our infrastructure costs... When we went through [the ELC COVID supplement], we did look at what amounts we could make available to our local health departments that would be impactful.”
-State Health Department

ELC FUNDS SUPPORTED LHD SURGE CAPACITY DURING THE COVID-19 PANDEMIC

Participants shared examples of how supplemental ELC funding was used to support local jurisdictions during the pandemic, as well as strategies and ideas for future supplemental or core ELC funds.

Local Use of Supplemental ELC Funds

- Hired epidemiologists, biostatisticians, nurses, and/or administrators
- Sponsored professional development opportunities to new hires

Opportunities for Future ELC Funds

- Outdated and limited data systems have limited interoperability between the state and LHDs
- More direct funding to LHDs through ELC Core can strengthen lab and surveillance capacity

“ [We] are trying to build up our surveillance and data capabilities to have real-time ideas of what's happening in our local community, not just at the state level.”
-Local Health Department

SUMMARY OF INSIGHTS & RECOMMENDATIONS

Three key insights emerged for how to improve engagement between states and LHDs for future ELC activities:

“ I would love to just know—even if it was a quick one pager—this is what we [the state] received [and] these are the initiatives that we're going to do. We have to do that for all of our grants that we receive, right—mostly either to them or to the public.”
-Local Health Department

- 1 Establish consistent engagement between local and state levels, such as by engaging SACCHOs**
 - Some LHDs were unaware of ELC funding until they received supplemental funding for COVID-19
 - LHDs felt there were not many avenues to provide input about the needs of their jurisdictions
- 2 Reduce grant restrictions and timelines around local funding for ELC**
 - LHDs were concerned that states put restrictions on the funding in addition to those from CDC
 - ELC did not often align with local needs due to delays in receiving funding, as well as the overlap of ELC's allowable activities with other funding mechanisms
- 3 Focus future funding on improving local data infrastructure and interoperability between state and local systems**