



OFFICE OF
Health Equity

ORGANIZATIONAL
ASSESSMENT FOR

Equity

INFRASTRUCTURE

2023
RESULTS
REPORT



Acknowledgement

Thank you to all Local Health Jurisdictions for your participation in the Organizational Assessment for Equity Infrastructure 2023. Your leadership and commitment to health equity projects are incredible and inspiring to many. We hope the assessment continues to drive conversations that can inform your work just as the results help us strategize our provision of equity-focused technical assistance.

In partnership,

The Equity Technical Assistance Team
Advancing Community Equity Branch, Office of Health Equity
California Department of Public Health

Suggested Citation: *California Department of Public Health (December 2023). [Organizational Assessment for Equity Infrastructure](#) Results Report. Richmond, CA: California Department of Public Health.*

Table of Contents

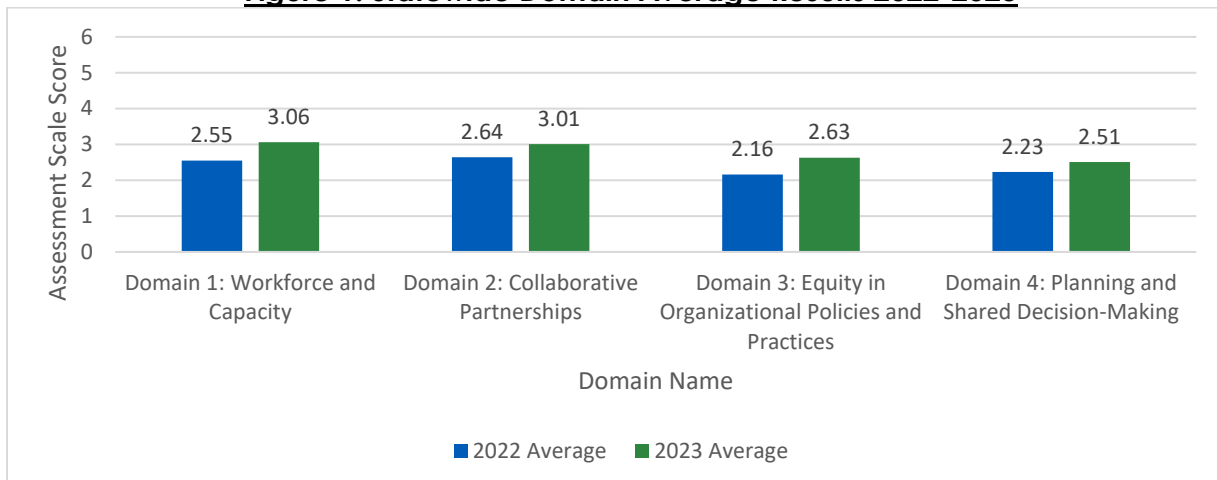
Executive Summary	3
Background.....	6
Approach	8
Definitions, Domains, and Competencies.....	8
Assessment Scale & More	8
Strengths & Limitations of the Assessment.....	9
Statewide Results	10
Regional Results	15
Rural North Highlights.....	15
Greater Sierra Sacramento Highlights	22
Central California Highlights	28
Bay Area Highlights	35
Southern California/Los Angeles Highlights.....	41
Conclusion & Next Steps.....	48
Appendix 1: Organizational Assessment for Equity Infrastructure	50
Appendix 2: Domain and Competency Definitions	50
Appendix 3: Statewide 2023 Competency Results.....	51
Appendix 4: Rural North 2023 Competency Results	53
Appendix 5: Greater Sierra Sacramento 2023 Competency Results.....	56
Appendix 6: Central California 2023 Competency Results.....	58
Appendix 7: Bay Area 2023 Competency Results	61
Appendix 8: Southern California/Los Angeles 2023 Competency Results	63

Executive Summary

This report gives an overview of the 2023 Organizational Assessment for Equity Infrastructure via the Background, Approach, and Strengths and Limitations sections. It then explores the statewide and regional assessment results and ends with a conclusion and plan for future technical assistance from the Office of Health Equity at the California Department of Public Health (CDPH). The purpose of the 2023 Organizational Assessment for Equity Infrastructure is for Local Health Jurisdictions (LHJ) to continue dialogue, monitor progress, and implement changes for equity infrastructure. Comparisons between 2022 and 2023 results provide insight on LHJ development and the success of equity technical assistance since the Baseline Assessment was administered one year ago in 2022. Each of the CDPH defined regions in California has its own results section that includes domain averages, competency averages, priority areas, and strengths. Additional results are included in the appendices for reference. Similar to last year, the assessment tool is divided into four overall domains with three competencies per domain (12 competencies total). Each competency is measured by three levels of development—Early (1-2), Established (3-4), and Strong (5-6)—on a scale from 1 through 6. All LHJs in the State of California were invited to complete the assessment from April to June 2023. Of the 61 Local Health Jurisdictions, 59 completed the assessment.

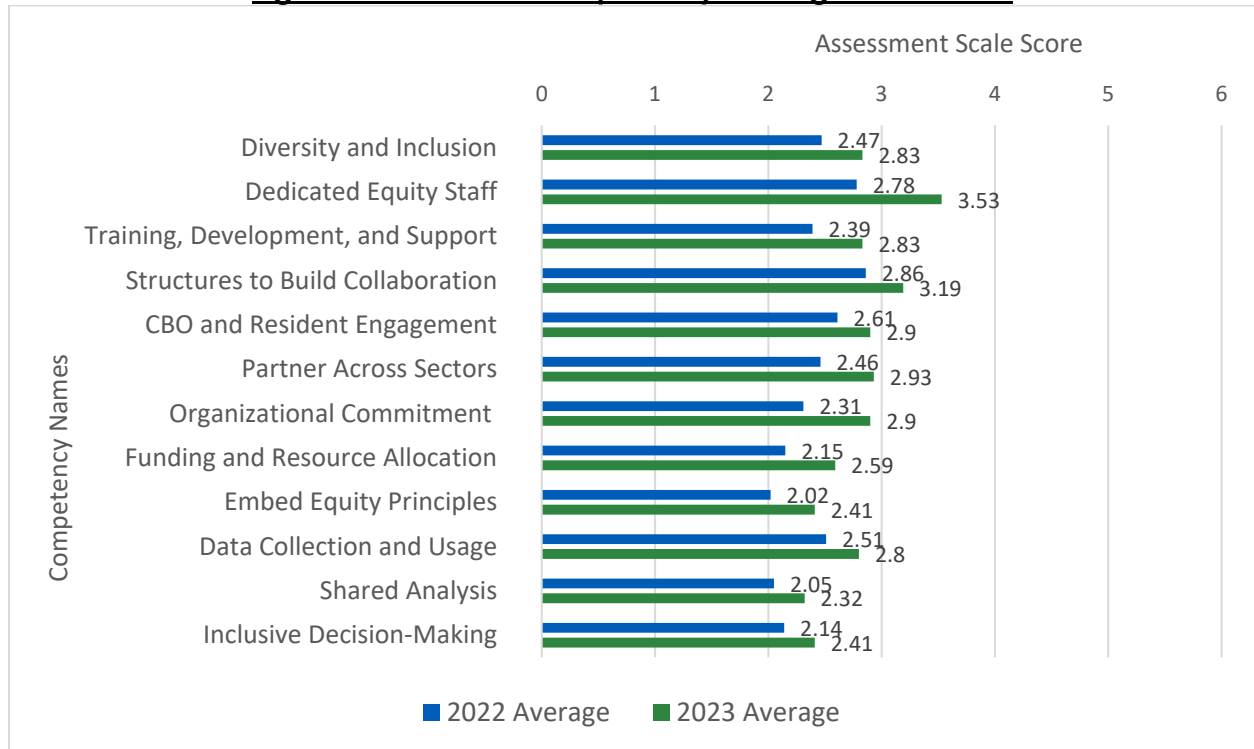
The assessment results shape equity capacity building at the local, regional, and state level. A statewide summary of results indicates that Local Health Jurisdictions in California are in the Early (1-2) and Established (3-4) levels of development. Figure 1 shows a comparison of the 2022 baseline results and 2023 results. There is an improvement in all four domains, most noticeably Domains 1 and 2 shift into the Established level (3-4) of development. The domain averages are as follows:

Figure 1: Statewide Domain Average Results 2022-2023



Within each domain, there is also an improvement in the three respective competencies. Dedicated Equity Staff (Domain 1) and Structures to Build Collaboration (Domain 2), remain the top two most developed competencies this year. They are the only competencies that move from the Early Level (1-2) into the Established Level (3-4) of development. Statewide competency averages are as follows:

Figure 2: Statewide Competency Averages 2022-2023



Of the 12 competencies in the assessment, LHJs also selected the top three competencies where they would like to focus equity development. As a state, the equity development priorities for LHJs did not change over the past year and are as follows:

- A. **Training, Development, and Support** found in Domain 1: Workforce and Capacity
- B. **Embed Equity Principles** found in Domain 3: Equity in Organizational Policies and Practices
- C. **Inclusive Decision-Making** found in Domain 4: Planning and Shared Decision-Making

These statewide results are further analyzed by region: Rural North, Greater Sierra Sacramento, Central California, Bay Area, and Southern California/Los Angeles (SoCal/LA) (Figure 3). Each region reviews domain results, competency results, and competency priorities, and highlights regional strengths including some of the following:

- Dedicated Equity Staff (Domain 1) is the most developed competency in all five regions. In each region it moves into the Established level (3-4) of development. These results correlate with the designated equity funds most LHJs received from the state to build equity infrastructure and hire equity staff.
- Bay Area is the only region with three domains in the Established level (3-4) of development (Domains 1, 2, and 3).
- Rural North and SoCal/LA regions both have two domains in the Established level (3-4) of development (Domains 1 and 2 for both).
- All five regions are in the Early level (1-2) of development for Domain 4: Planning and Shared Decision-Making.

The quantitative data of the assessment shows California has made strides in advancing equity infrastructure in just one year. LHJs continue to build internal capacity to advance health equity with the support of initiatives such as the [California Equitable Recovery Initiative \(CERI\)](#), [Future of Public Health \(FoPH\)](#), and [California Strengthening Public Health Infrastructure \(CASPHI\)](#).

Nevertheless, health equity for all cannot be achieved through limited term funding. Qualitative data from the assessment describes an equity journey that requires a multi-sector approach, long-term commitment between leadership and staff, partnerships with communities, and sustainable funding. The California Department of Public Health will continue to work with local health jurisdictions to reach a healthier California for all.

Background

In 2022, the [Office of Health Equity \(OHE\)](#) in conjunction with the Office of Policy and Planning (OPP) (formerly known as the Fusion Center) in the California Department of Public Health (CDPH) launched the Baseline Organizational Assessment for Equity Infrastructure. The second iteration of this assessment was released to Local Health Jurisdictions in April of 2023.

Funding for the assessment came from CDC's *National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities* (also referred to as the [California Equitable Recovery Initiative \[CERI\]](#)). This grant was designed to address COVID-19 related health disparities and advance health equity. Local Health Jurisdictions (LHJs) participating in CERI are required to establish a dedicated Equity Lead staff position, implement targeted local equity activities, and conduct an equity-focused organizational assessment.

The Organizational Assessment for Equity Infrastructure continues to fulfill one of the key required activities of the CERI grant. Regardless of grant participation, all LHJs are invited and encouraged to fill out the assessment. A total of 59 out of 61 LHJs submitted responses in both years it was administered.

Results from the 2022 and 2023 assessments are used as part of a statewide process to understand local public health equity capacity, identify priorities for technical assistance, and inform the [State Health Equity Plan \(SHEP\)](#). A comparison of both assessments sheds light on the advances LHJs made in a year and highlights considerations to strengthen local capacity and advance equity work.

The results of this assessment are further broken down into five regions as shown in Figure 3: Rural North, Greater Sierra Sacramento, Central California, Bay Area, and Southern California/Los Angeles. The regional analysis is part of an effort to honor the uniqueness of geographies and demographics, consider strengths, challenges, and needs, and provide tailored regional technical assistance beyond a statewide and local approach.

Figure 3: Regions in California



Approach

Local Health Jurisdictions completed the assessment between April and June 2023. Recognizing each jurisdiction is in a unique position with different levels of resources and needs, LHJs were given the flexibility to complete the assessment with their preferred method (*i.e.* Health Equity Lead completes the assessment on their own, key informant interviews guide answers, or each department fills out the assessment and scores are aggregated). The CDPH Equity TA team did provide guidance on best practices to ensure consistency from year to year, specifically, collaborative approaches that engage different positional levels across a breadth of programs.

Definitions, Domains, and Competencies

The assessment is divided into four domains and sub-divided into three competencies. Domains and competencies were identified by LHJs through a survey (July 2021) and existing assessment tools and frameworks from the [Bay Area Regional Health Inequities Initiative \(BARHII\)](#), [Human Impact Partners \(HIP\)](#), [Coalition of Communities of Color \(CCC\)](#), and the [Government Alliance on Race and Equity \(GARE\)](#).

See [Appendix 2](#) for Domain and Competency Definitions

Assessment Scale & More

Each competency is measured by three levels of development—**Early**, **Established**, and **Strong**—on a scale from 1 through 6 (Figure 4).

Figure 4: Assessment Scale

Early		Established		Strong	
1	2	3	4	5	6
Not yet, or learning stage	Planned but not started or in initial/pilot stages of implementation	Working towards this but not fully achieved	Fully achieved	In place with evidence of its use (e.g., policies, procedures, robust evaluation plan)	Practices are sustainable and ongoing and may be shared with others as “best practices”

LHJs select the number with which their organization most aligns. It is emphasized that the intention is not to judge an organization’s work; “Early” is not synonymous to “bad” and “Strong” does not necessarily mean “good.” The examples provided for each competency in the assessment serve as a reference to help

LHJs reflect on how equity is embedded throughout their department and are not a comprehensive list or checklist of requirements (see [Appendix 1](#) for full assessment). LHJs compare the scope and depth of their activities relative to the examples. An optional text box is included within each competency to add more detail and explanation to their choice.

In addition to selecting numerical competency levels according to the assessment scale, LHJs choose two or three competencies to prioritize in the future. At the end of the assessment, LHJs describe their organizational strengths related to equity and the process used to fill out the assessment.

Strengths & Limitations of the Assessment

The assessment has a variety of strengths and limitations and overall, feedback from LHJs indicates that it is a helpful tool to discuss local equity work. For CDPH, it provides a metric to monitor progress and inform technical assistance efforts. In both 2022 and 2023, there was a high response rate of 59/61 submissions that provide a comprehensive view of equity infrastructure throughout California. There were two LHJs that only completed the assessment for one year, meaning the average changes presented may not fully reflect the true change for these LHJs. The majority of LHJs, however — 58 — filled out the survey in 2022 and 2023, making meaningful comparisons across both years possible.

Highlights:

- **Defined & Consistent Metrics:** Using the same 6-level scale and 12 competencies allow participants to get used to a framework that is short and concise. Defining each level in the scale and each competency also helps eliminate subjectivity.
- **SurveyMonkey Format:** Participants can easily fill out the assessment online and copy the questions into another format to share within their organization for wider input. LHJs can freely access the assessment when convenient even after logging off.
- **Sliding Scale with Examples:** LHJs from all regions and equity development levels can complete the assessment.
- **Desirability Bias:** Tendency to answer in a way that will be favorable to others. CDPH tries to minimize this potential bias by deidentifying results and assuring LHJs there are no repercussions or reward for Early, Established, or Strong levels of development.

• **Methodology Variance:** Different approaches of completing the assessment among LHJs and by LHJs from one year to the next. This variation of methodologies creates flexibility but means results between years are not entirely comparable given the different methods and perspectives of the LHJs completing the assessment. For maximum validity, CDPH strongly recommends LHJs use the same approach from the previous year and added a comment box to document this year’s chosen method of completion.

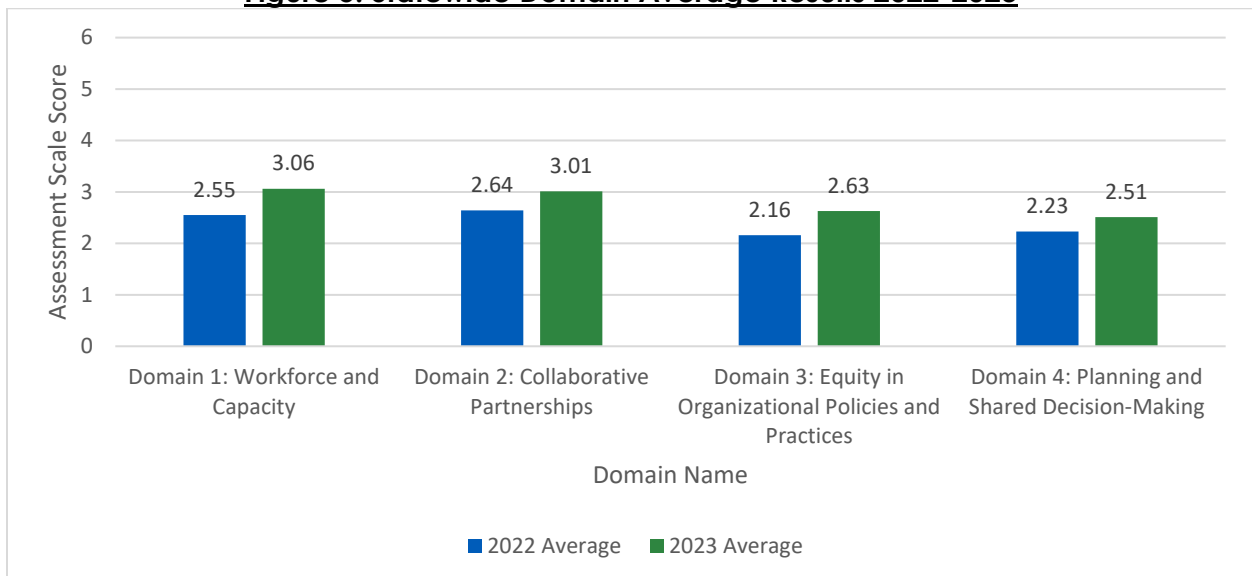
Statewide Results

Submissions from 59 out of 61 Local Health Jurisdictions are analyzed to determine the progress of equity infrastructure across California.

This section outlines key highlights of the state’s domain averages, competency averages and priorities, and regional strengths with comparison to 2022 results when applicable.

Statewide Domain Averages

Figure 5: Statewide Domain Average Results 2022-2023



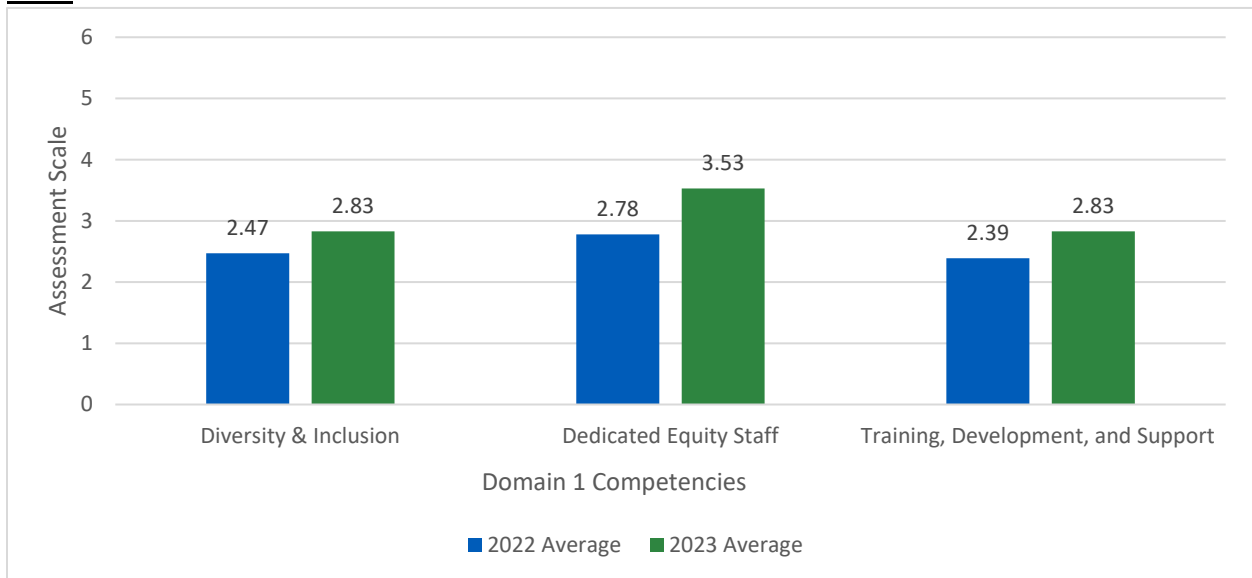
Statewide Domain Average Highlights

- All four domains have an upward progression from 2022.
- Domains 1 and 2 shift from the Early level (1-2) into the Established level (3-4) of development in 2023.
- In both years, Domains 3 and 4 are in the Early level (1-2) of development.
- Domain 1 has the greatest improvement from 2022 with a 0.51 average increase.
- Domain 4 has the least improvement from 2022 with a 0.28 average increase.

Statewide Competency Averages

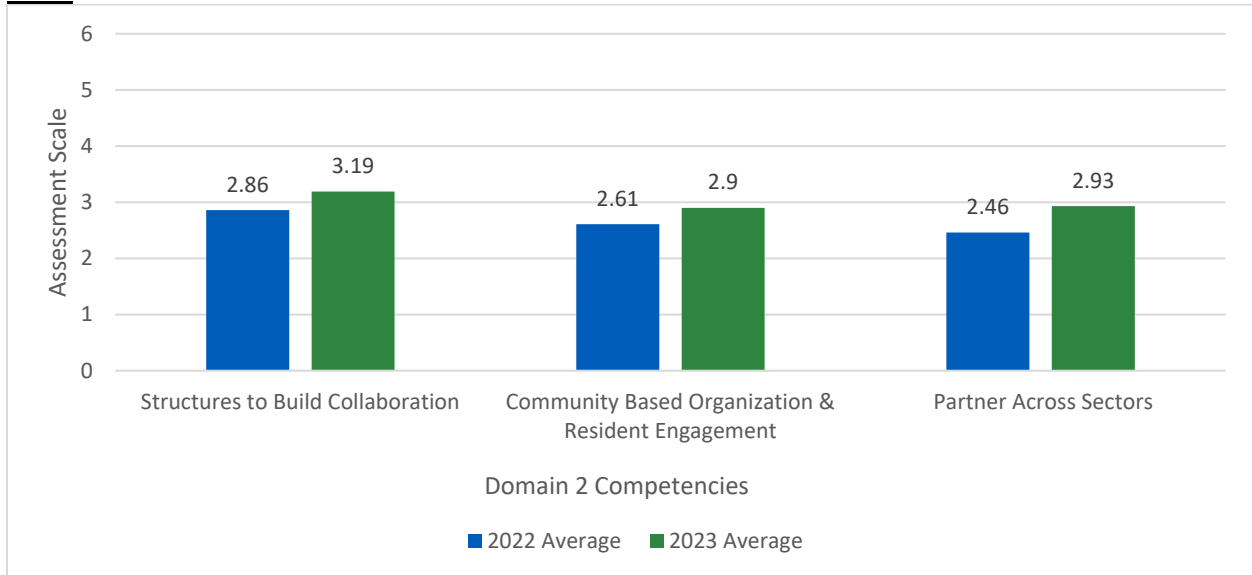
This section examines the three competency averages within each of the four domains. The four figures below show that all twelve competency averages have an upward progression. Two competency averages move from an Early level (1-2) in 2022 to an Established level (3-4) in 2023. All other competencies improve but remain in the Early level (1-2) of development. Competency averages for the entire state are as follows:

Figure 6: Statewide Domain 1 (Workforce and Capacity) Competency Averages 2022-2023



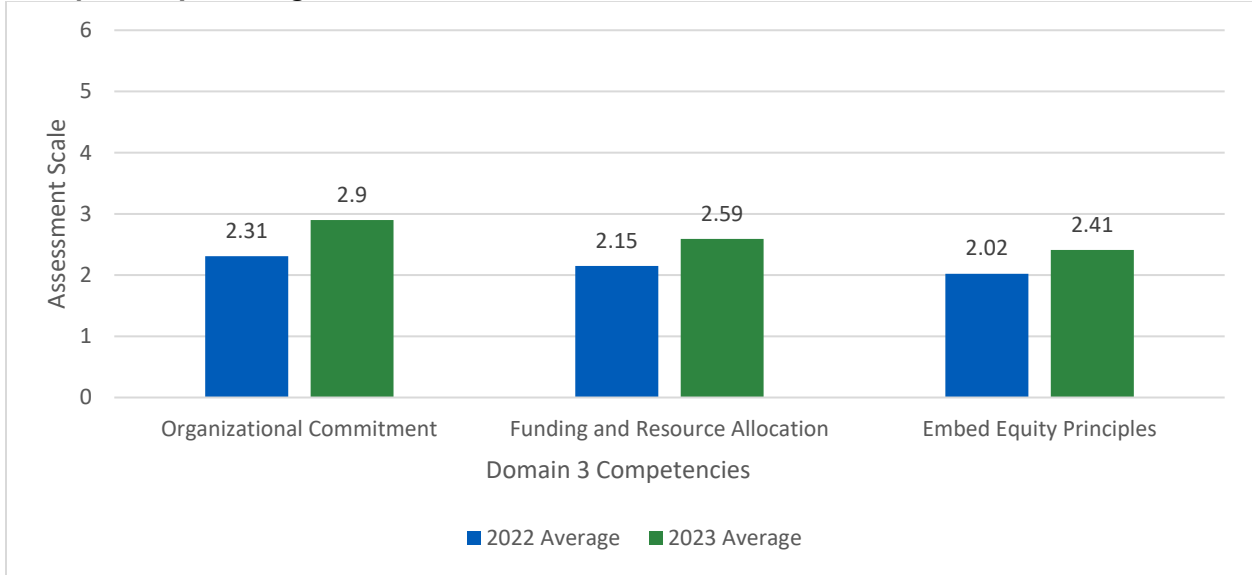
- Dedicated Equity Staff (3.53) is the most developed competency in 2023 and has the greatest improvement with a 0.75 average increase. This is why Domain 1 also has the largest improvement and is the most developed domain in 2023.
- Dedicated Equity Staff is one of two competencies that moves from an Early level (1-2) in 2022 to an Established level (3-4) in 2023.

Figure 7: Statewide Domain 2 (Collaborative Partnerships) Competency Averages 2022-2023



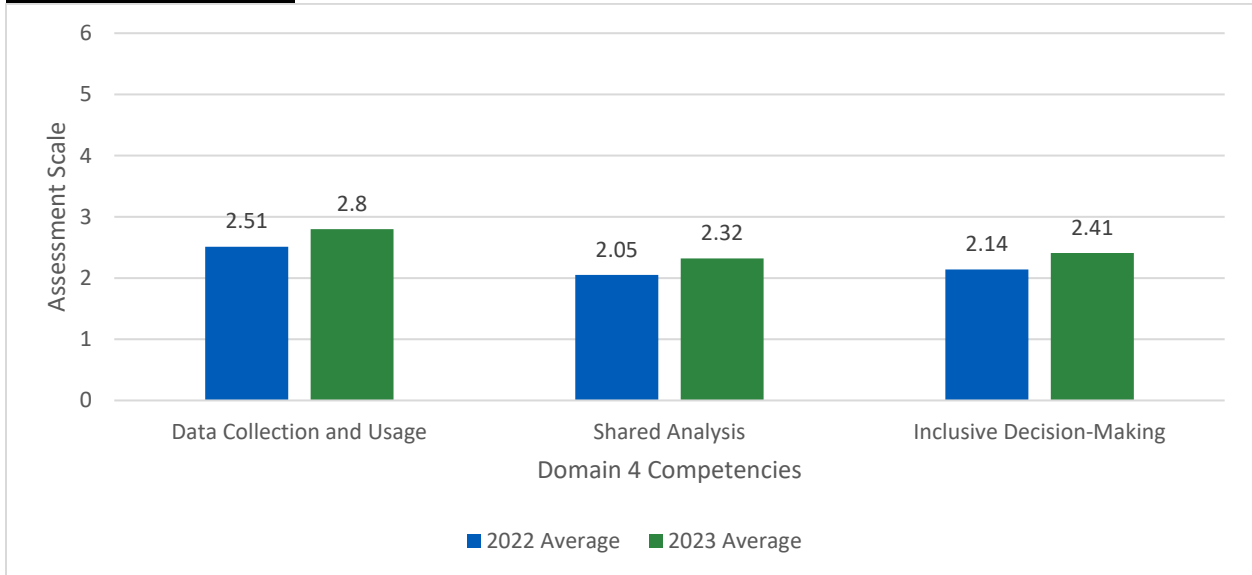
- Structures to Build Collaboration is one of two competencies that moves from an Early level (1-2) in 2022 to an Established level (3-4) in 2023.

Figure 8: Statewide Domain 3 (Equity in Organizational Policies and Practices) Competency Averages 2022-2023



- While no competencies move into the Established level (3-4) in Domain 3, Organizational Commitment is close and has the second largest improvement of the state with a 0.59 average increase.

Figure 9: Statewide Domain 4 (Planning and Shared Decision-Making) Competency Averages 2022-2023



- Shared Analysis is the least developed competency in 2023 and has the least amount of improvement (along with Inclusive Decision-Making) with a 0.27 average increase.

See [Appendix 3](#) for a breakdown of 2023 competency averages.

Statewide LHJ Competency Priorities

Table 1 shows the competency priorities selected by 59/61 participating LHJs; each LHJ selected up to three competencies to prioritize in 2023. Cells shown in blue are the top three competency priorities for each year. The percentages represent the number of LHJs that selected the competency as a priority out of the total number of LHJs in the state participating in the assessment (59).

Table 1: Statewide LHJ Competency Priorities in 2022 & 2023

Competency Name	2022 Percentage (%)	2023 Percentage (%)
Diversity and Inclusion	14%	15%
Dedicated Equity Staff	20%	10%
Training, Development, and Support	59%	58%
Structures to Build Collaboration	12%	17%
Community Based Organization and Resident Engagement	20%	34%
Partner Across Sectors	17%	17%
Organizational Commitment	14%	10%
Funding and Resource Allocation	19%	14%
Embed Equity Principles	39%	37%
Data Collection and Usage	22%	24%
Shared Analysis	10%	14%
Inclusive Decision-Making	36%	36%

The competency priorities did not shift from the previous year but there are two changes worth noting:

- Dedicated Equity Staff decreases by 10% on the number of LHJs that select it as priority and is the competency with the most progress across the state.
- There is a 14% increase in the number of LHJs that select Community Based Organization and Resident Engagement as a priority.

CDPH will use the competency priorities and average to plan for 2024 technical assistance services at a statewide level. Regional results shared below will also help inform regional technical assistance services.

Regional Results

The statewide results of this assessment are further broken down into regional results of the five regions: Rural North, Greater Sierra Sacramento, Central California, Bay Area, and Southern California/Los Angeles.

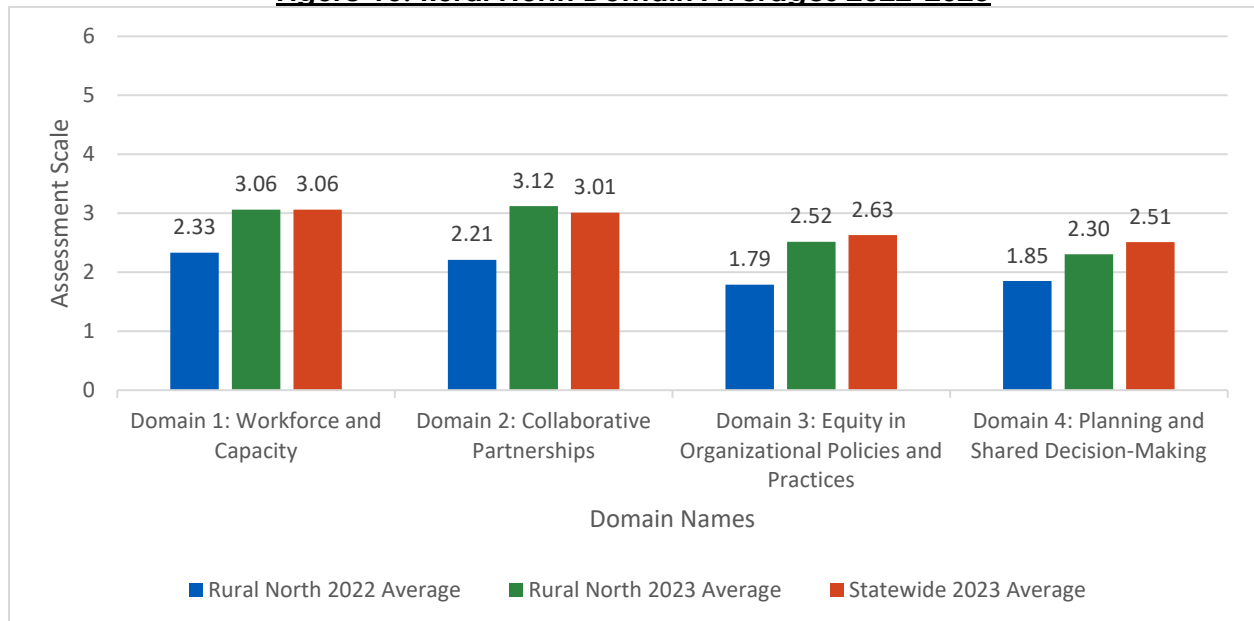
Rural North Highlights

The Rural North region consists of 11 Local Health Jurisdictions: Del Norte, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Shasta, Siskiyou, Tehama, and Trinity. All 11 LHJs in the Rural North region completed the Organizational Assessment.

This section outlines key highlights of the Rural North’s 2023 domain averages, competency averages and priorities, and regional strengths with comparison to 2022 results when applicable.

Rural North Domain Averages

Figure 10: Rural North Domain Averages 2022-2023



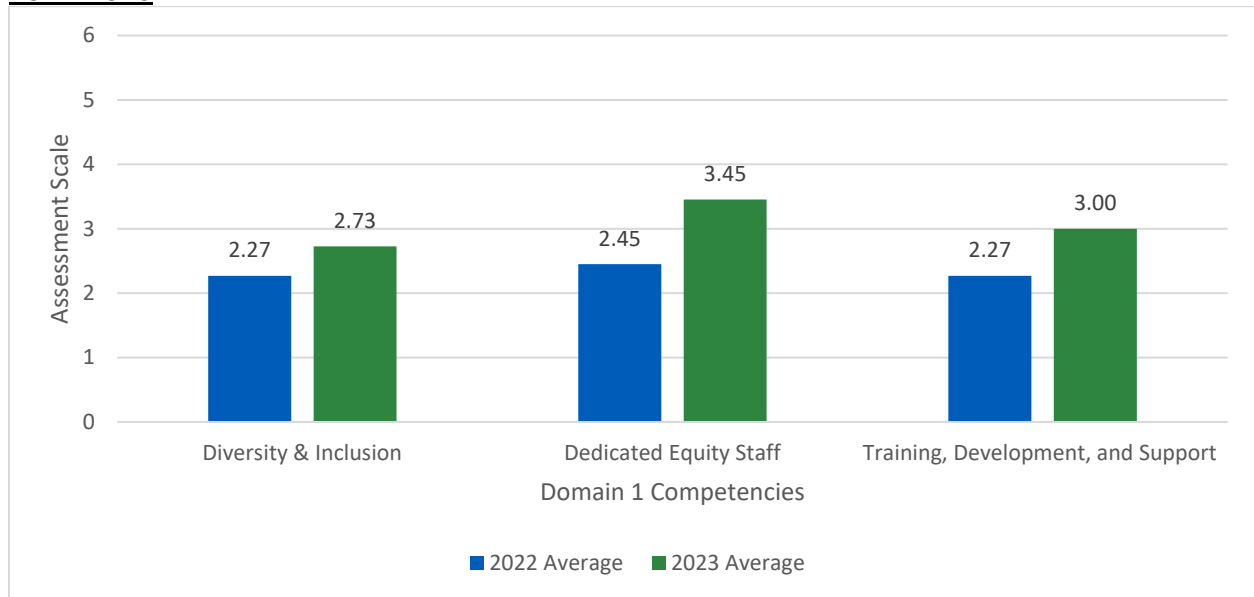
Domain Average Highlights

- All four domains have an upward progression from the previous year.
- Domain 1 has the same average as the state and Domain 2 is slightly above the statewide average.
- In 2023, Domain 2 is the most developed domain, and has the most improvement with an average increase of 0.91.
- Domains 1 and 2 shift into the Established level (3-4) of development in 2023.
- Domain 3 and Domain 4 remain in the Early level (1-2) of development but improve overall and closely align with state averages.

Rural North Competency Averages

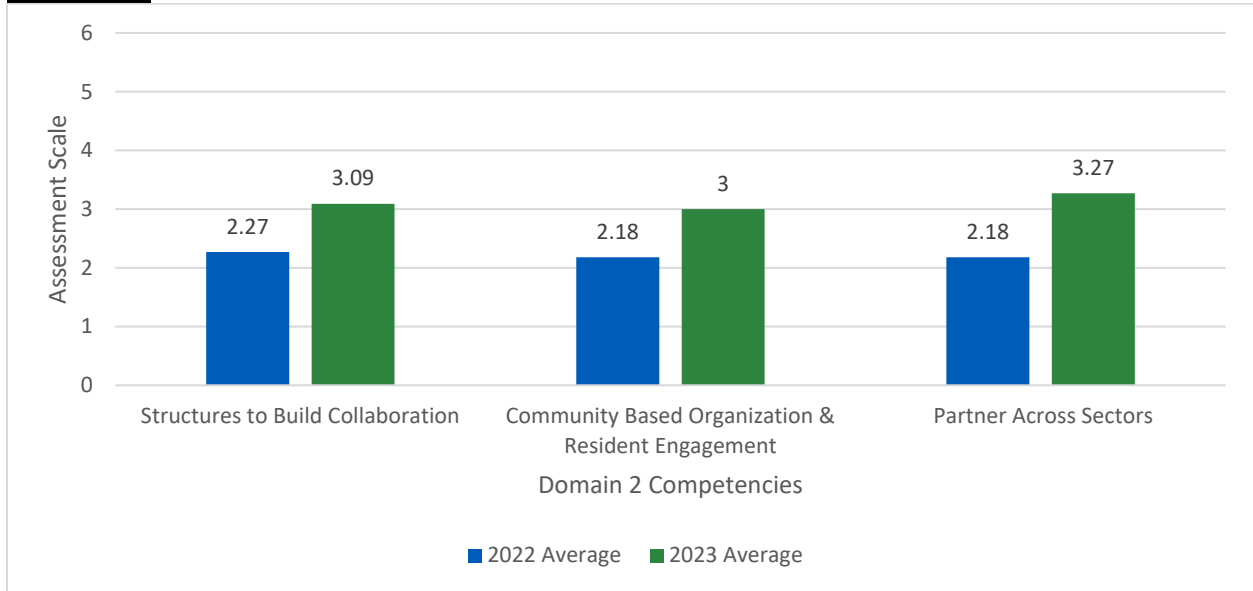
This section examines the three competency averages within each of the four domains. All 12 competency averages have an upward progression. Five competency averages move from an Early level (1-2) in 2022 to an Established level (3-4) in 2023. All other competencies improve but remain in the Early level (1-2). Competency averages for the Rural North region are as follows:

Figure 11: Rural North Domain 1 (Workforce and Capacity) Competency Averages 2022-2023



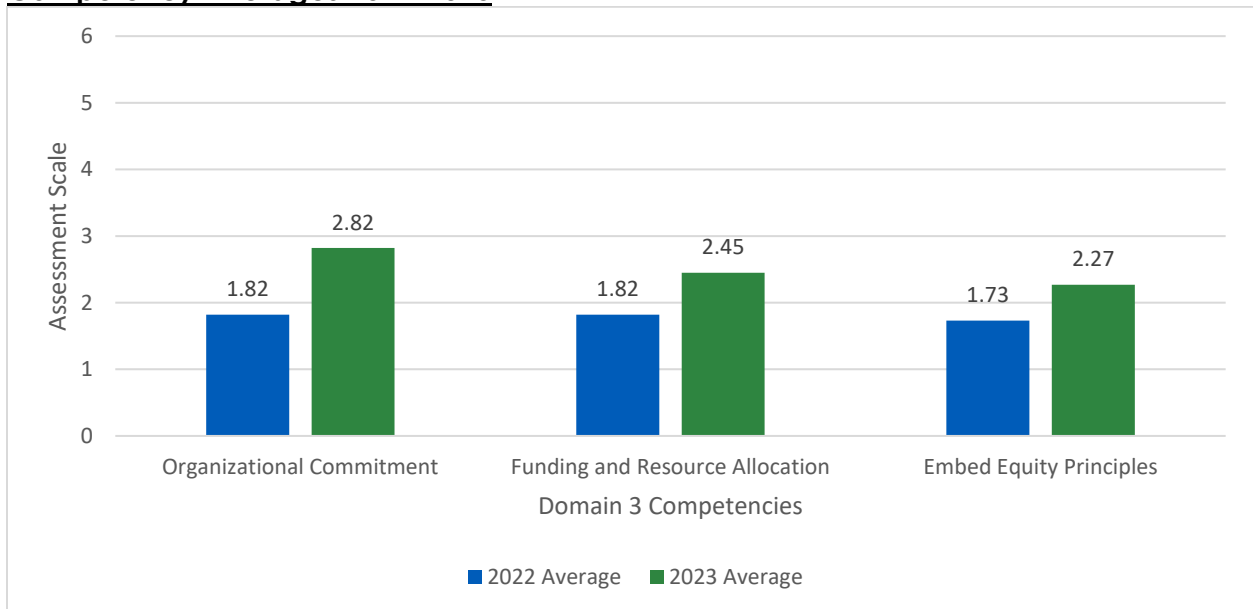
- Dedicated Equity Staff (3.45) continues to be the most developed competency and moves into the Established Level (3-4) with a 1.0 average increase in development levels.
- Training, Development, and Support is also one of the five competencies that moves into the Established Level (3-4).

Figure 12: Rural North Domain 2 (Collaborative Partnerships) Competency Averages 2022-2023



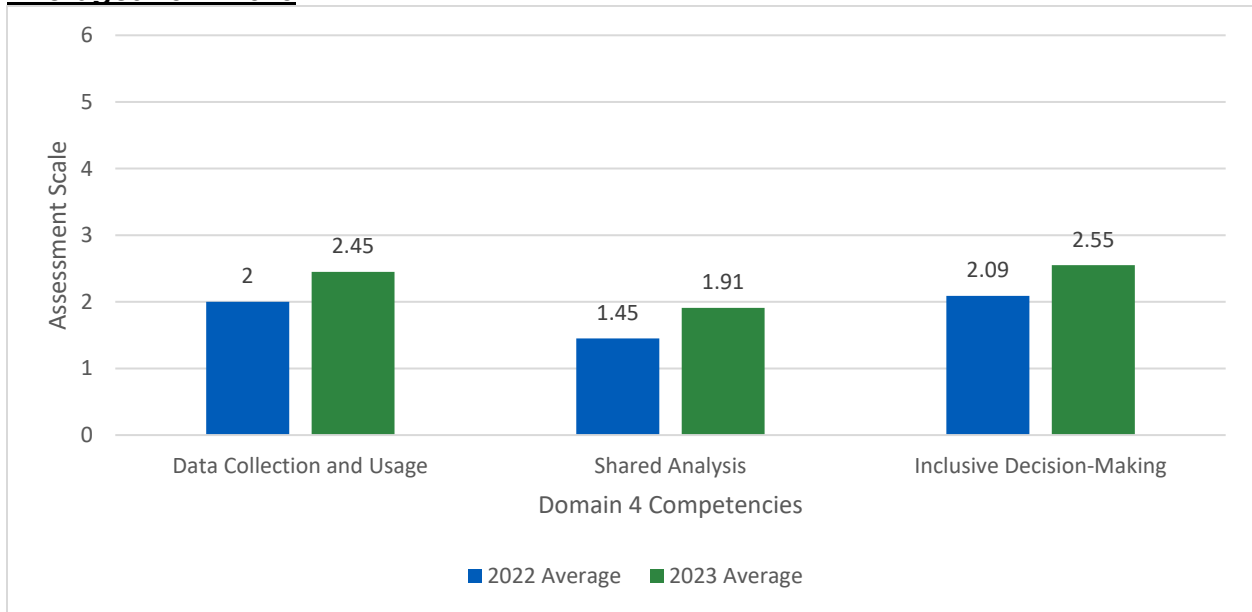
- Partner Across Sectors (3.27) is the second most developed competency and has the largest improvement of all twelve competencies with a 1.09 average increase.
- All three competencies move into the Established Level (3-4) making Domain 2 the most developed domain in the Rural North.

Figure 13: Rural North Domain 3 (Equity in Organizational Policies and Practices) Competency Averages 2022-2023



- While no competency in Domain 3 moves into the Established level (3-4), all show progress. With a one-point average increase, Organizational Commitment (2.82) is among the top three competencies with the largest improvement.

Figure 14: Rural North Domain 4 (Planning and Shared Decision-Making) Competency Averages 2022-2023



- Shared Analysis continues to be the least developed competency. While no competency in Domain 4 moves into the Established level (3-4), all show progress.

See [Appendix 4](#) for a breakdown of 2023 competency averages.

Rural North Competency Priorities

Table 2 shows the competency priorities of the Rural North LHJs. Each LHJ selected up to three competencies to focus on in 2023. Cells shown in blue are the top competencies in each year. The percentages represent the number of LHJs that selected the competency as a priority out of the 11 participating LHJs in the region.

Table 2: Rural North Competency Priorities 2022-2023

Competency Name	2022 Percentage (%)	2023 Percentage (%)
Diversity and Inclusion	18%	18%
Dedicated Equity Staff	45%	18%
Training, Development, and Support	36%	55%
Structures to Build Collaboration	18%	9%
Community Based Organization and Resident Engagement	18%	45%
Partner Across Sectors	9%	18%
Organizational Commitment	18%	0%
Funding and Resource Allocation	27%	9%
Embed Equity Principles	36%	45%
Data Collection and Usage	36%	36%
Shared Analysis	9%	27%
Inclusive Decision-Making	18%	9%

Two of the Rural North's competency priorities align with that of the State: Training, Development, and Support and Embed Equity Principles.

Compared to 2022, there are quite a few shifts in 2023 priorities, among the most notable are the following:

- Dedicated Equity Staff decreases as priority by 27% in 2023 as equity leads are hired in the region. This competency is the most developed in 2023 with an average of 3.45.
- Training, Development, and Support is a new top competency priority for the region with a 19% increase from 2022.
- Community Based Organization and Resident Engagement is a new top competency priority with a large increase of 27% from 2022.
- Embed Equity Principles remains a competency priority increasing by 9% from the previous year.
- Both Organizational Commitment, and Funding and Resource Allocation decrease in the number of LHJs that select them as priorities by 18%.
- Data Collection, and Usage remains the same in 2022 and 2023. In the 2023 assessment, many LHJs indicate that they require more localized data for their counties. This is a struggle due to the small and isolated populations in many counties of the Rural North.
- Shared Analysis experiences a relatively large percentage increase of 18%. The need for community data may be linked to the competency priority increase.

In summary, the top three competency priorities in the Rural North in 2023 are Training, Development, and Support (55%), Community Based Organization & Resident Engagement (45%), and Embed Equity Principals (45%). Some of the

assessment's qualitative data provide insight as to why. While many Rural North LHJs state that over the past year training opportunities have greatly increased in their organizations, LHJs also express that additional measures to improve Training, Development, and Support can be taken; including providing trainings for all levels of staff that cover a variety of public health equity topics that have a lasting impact in their organizations.

Rural North LHJs select Community Based Organization and Resident Engagement as a competency priority to address the disconnect between public health organizations and communities. LHJs in the Rural North region state that efforts to proactively outreach to communities are often unattainable or non-existent and would like to create strategies to formalize relationships through public health community advisory boards, seek community input on health policies and programs, and maintain regular interactions with community partners. Overall, the Rural North region expresses a strong need to build and establish trust with communities to increase and improve community engagement. It is interesting to note, however, that Domain 2 (Collaborative Partnerships) is the most developed domain that has the largest improvement in the Rural North.

Much of the Rural North region feels Embedding Equity Principles across their organizations is a struggle because of the unfamiliarity of equity terms amongst organizational staff and outdated policy language that is not inclusive of equity. Many LHJs in the region also state that equity is felt as a priority but not formalized or established through internal policies, procedures, and equity plans. Overall, the region selects Embed Equity Principles as a competency priority showing a need to establish accountability and standardization of day-to-day operations that integrate equity principles within their organizations.

Rural North Strengths

Of the 11 LHJs in Rural North, 7 LHJs provided short answers about their organization's equity strengths. Common themes from these answers are as follows:

- Most of the LHJs in the Rural North have an equity lead and/or staff members who focus on equity work, with support from leadership and the organization overall. Dedicated Equity Staff is the region's most developed competency with an average of 3.45.
- Many of the LHJs in the region comment on the passion for equity within their workforce. Staff are excited to work on developing equity infrastructure.
- Comments in the 2023 assessment indicate that organizational commitment has increased both in leadership and across the staff of the organization. This correlates with the 1.0 average increase (one of the highest in the region) for Organizational Commitment as a competency.
- Many LHJs state that one of the greatest strengths in their organization is partnerships across sectors and CBOs. These organizations share DEI best practices, participatory activities, and equity learning opportunities among each other. Partner Across Sectors (3.27) is the second most developed competency and has the largest improvement of all twelve competencies with a 1.09 average increase.

Quotes

“As a small health department in a small to mid-size community, I think our strength is our partnerships. Many of these cross sector related partnerships have been in place for a long time. There is always room to expand on that especially as long-time employees retire out of organizations and new relationships have to be developed.” -Tehama County

“My LHJ's strength are the program staff and leadership staff who come to work every day to make a difference in our community.” -Mendocino County

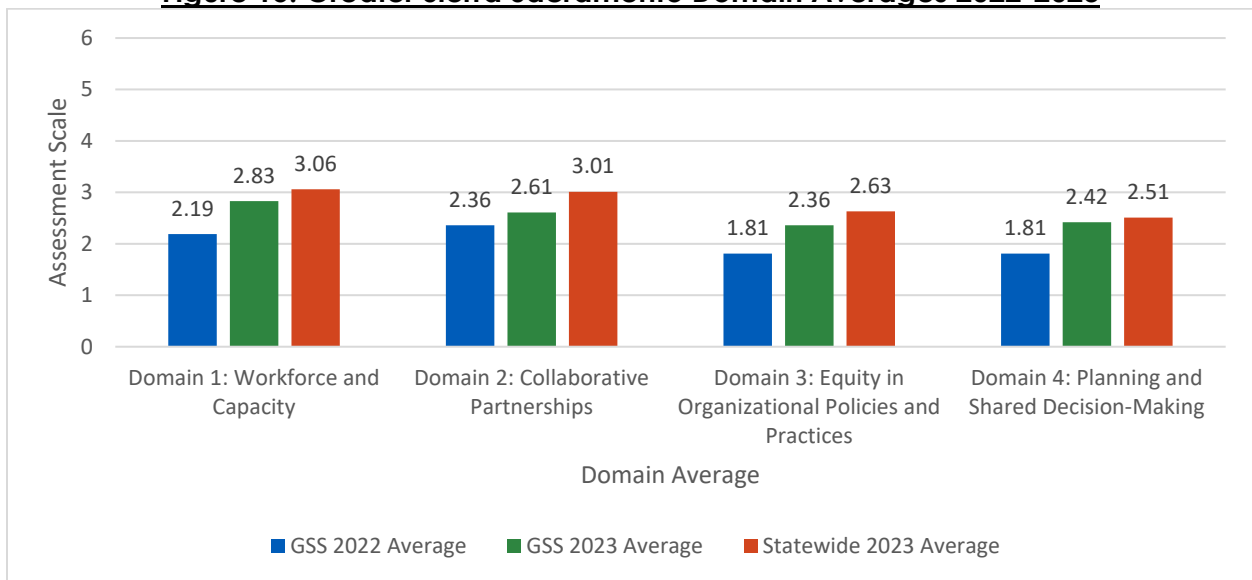
Greater Sierra Sacramento Highlights

The Greater Sierra Sacramento (GSS) region consists of 13 counties: Alpine, Amador, Butte, Colusa, El Dorado, Nevada, Placer, Plumas, Sacramento, Sierra, Sutter, Yolo, and Yuba. Overall, 12 out of 13 Local Health Jurisdictions (LHJs) completed this assessment.

This section outlines key highlights of the GSS region's 2023 domain averages, competency averages and priorities, and regional strengths with a direct comparison to 2022 results when applicable.

Greater Sierra Sacramento Domain Averages

Figure 15: Greater Sierra Sacramento Domain Averages 2022-2023



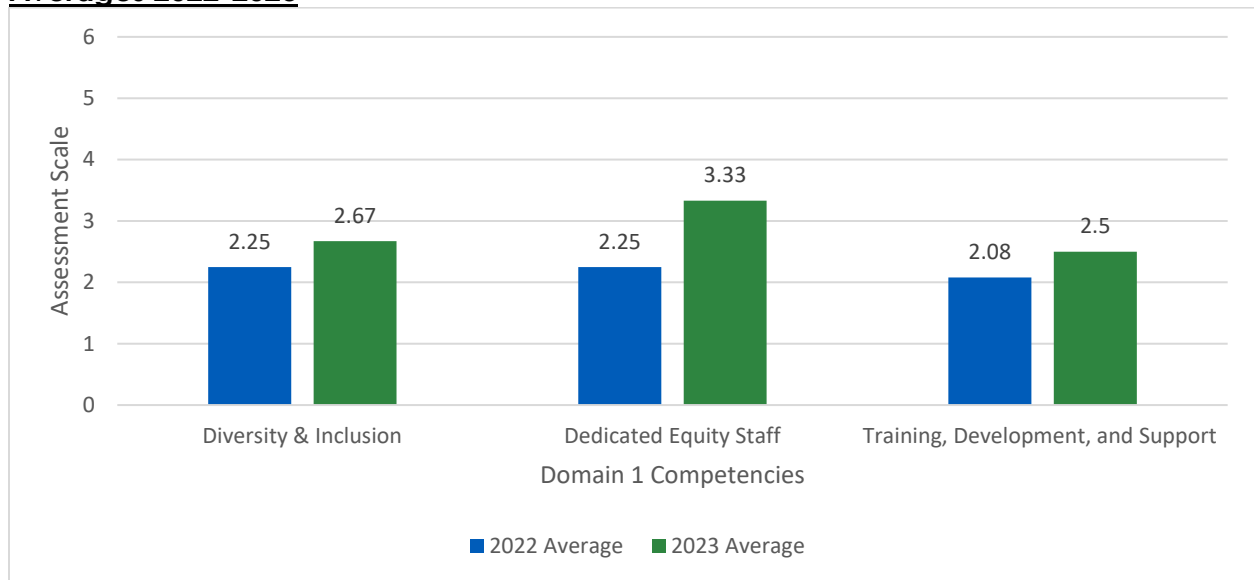
Domain Average Highlights

- All four 2023 domain averages are slightly lower than statewide averages. This trend was found in 2022 as well.
- All four domains remain at the Early level (1-2) of development but have an upward progression from 2022 results.
- In 2023, Domain 1 is the most developed domain and has the largest improvement from 2022 with a 0.64 average increase.
- While Domain 2 is the second most developed domain in 2023, it has the least improvement from 2022 with a 0.25 average increase.
- In 2023, Domain 3 is the least developed domain, whereas both Domains 3 and 4 tied as being the least developed domain in 2022.

Greater Sierra Sacramento Competency Averages

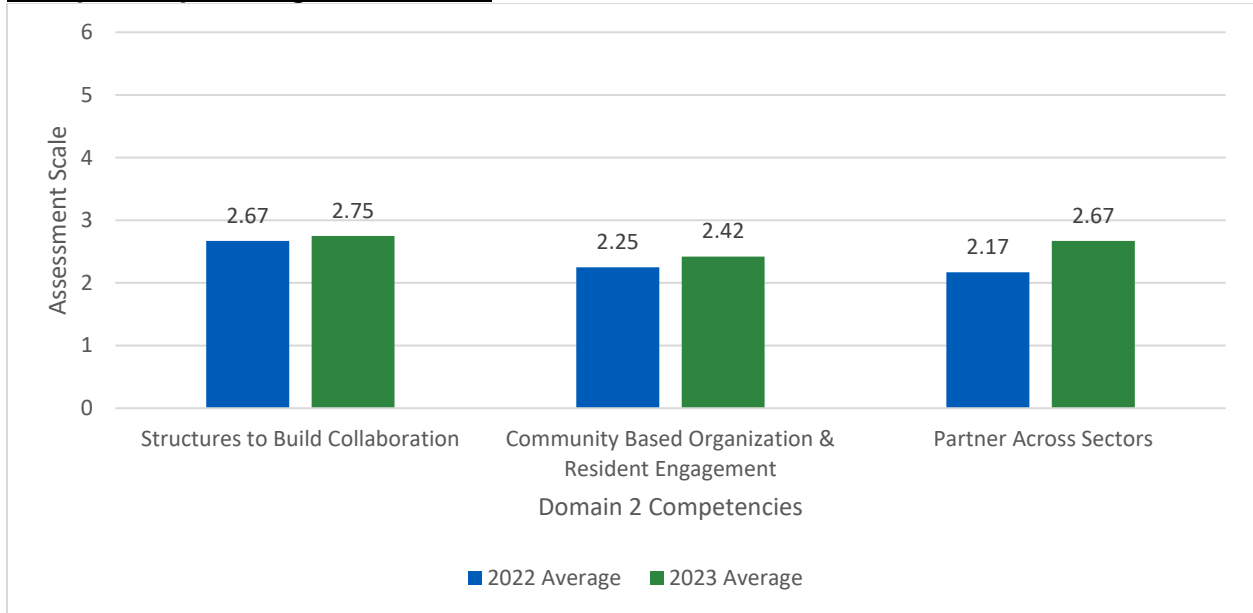
This section examines the three competency averages within each of the four domains. The four figures below demonstrate all twelve competency averages have an upward progression in 2023. One competency average moves from an Early level (1-2) of development in 2022 to an Established level (3-4) in 2023. All other competencies improve but remain in the Early level (1-2) of development. Competency averages for the Greater Sierra Sacramento region are as follows:

Figure 16: Greater Sierra Sacramento Domain 1 (Workforce and Capacity) Competency Averages 2022-2023



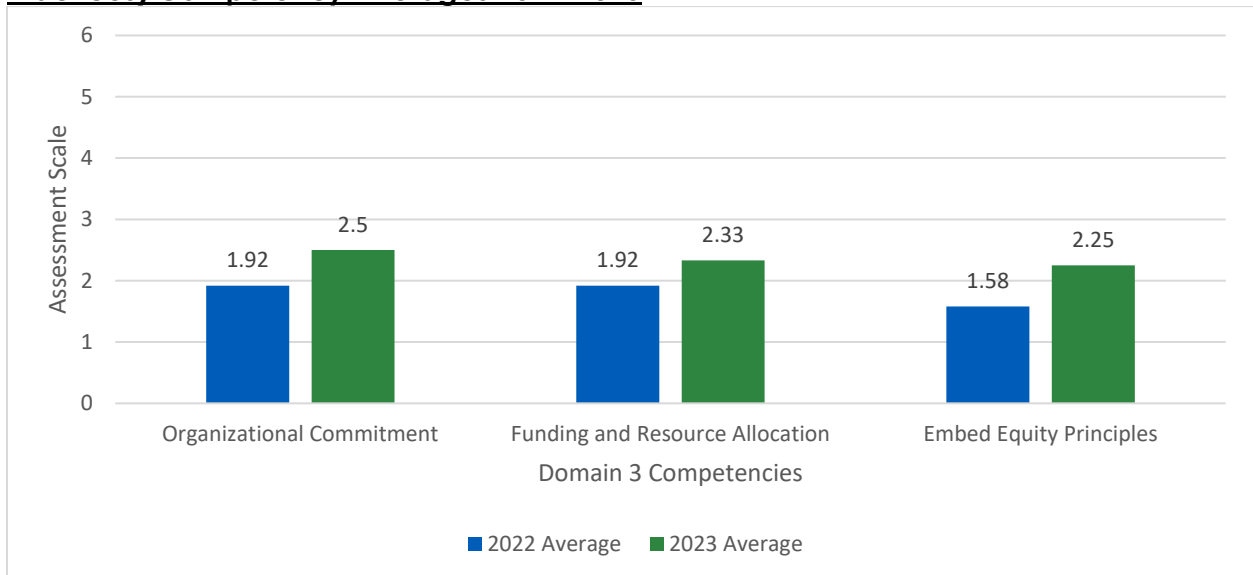
- In 2023, Dedicated Equity Staff is the most developed competency and has the largest improvement in the region with a 1.08 average increase from 2022. It is also the only competency to shift into the Established level (3-4) of development.
- The other two competencies remain in the Early level (1-2), but each improve with a 0.42 average increase.
- Domain 1 is the most developed domain of the region.

Figure 17: Greater Sierra Sacramento Domain 2 (Collaborative Partnerships) Competency Averages 2022-2023



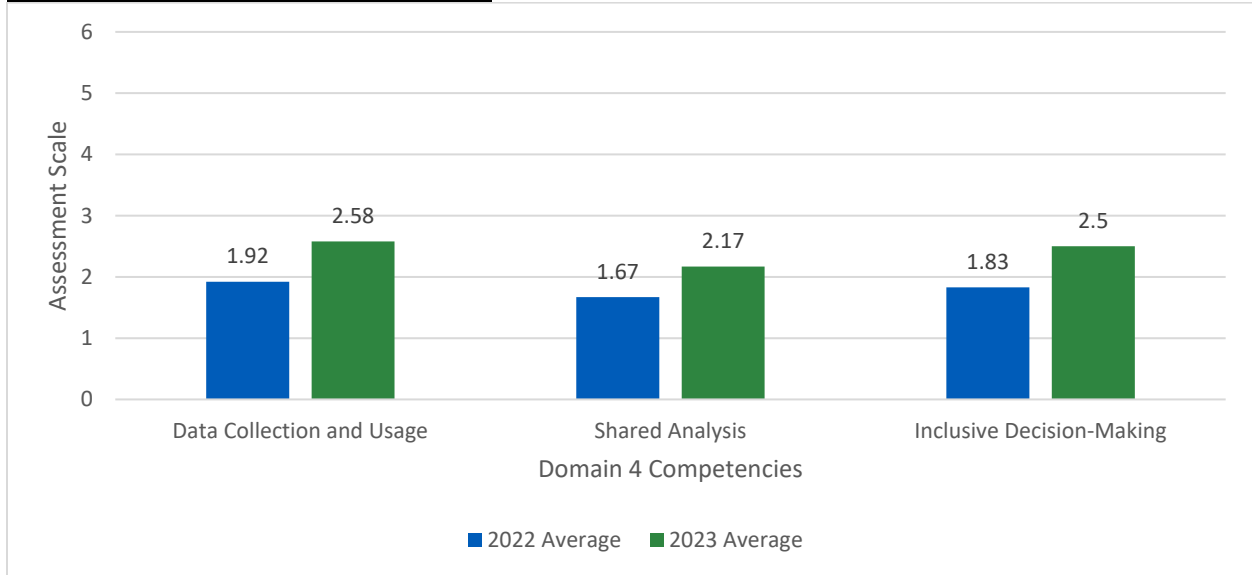
- Structures to Build Collaboration has the least amount of improvement in 2023 with a 0.08 average increase but is the second most developed competency because it was the most developed competency in 2022.
- All competencies remain in the Early level (1-2) but progress slightly from 2022 averages.

Figure 18: Greater Sierra Sacramento Domain 3 (Equity in Organizational Policies and Practices) Competency Averages 2022-2023



- Embed Equity Principles is the competency with the second largest improvement and ties with Inclusive Decision-Making from Domain 4, both with a 0.67 average increase.
- While Domain 3 is currently the least developed domain in the region, its competency averages have some of the most progress from 2022 averages.

Figure 19: Greater Sierra Sacramento Domain 4 (Planning and Shared Decision-Making) Competency Averages 2022-2023



- Shared Analysis is the least developed competency in 2023 but did improve from 2022 with a 0.5 average increase.
- Inclusive Decision-Making is the competency with the second largest improvement and ties with Embed Equity Principles from Domain 3, both with a 0.67 average increase.
- All competencies in Domain 4 remain in the Early level (1-2), but have great progress with 0.66, 0.5, and 0.67 average increases (from left to right).

See [Appendix 5](#) for a breakdown of 2023 competency averages.

Greater Sierra Sacramento Competency Priorities

Table 3 shows the competency priorities of GSS LHJs. Each LHJ selected up to three competencies to focus on in 2023. Cells in blue are the top three competencies of each year. The percentages represent the number of LHJs that selected the competency as a priority out of the 12 participating LHJs in the region.

Table 3: Greater Sierra Sacramento Competency Priorities 2022-2023

Competency Name	2022 Percentage (%)	2023 Percentage (%)
Diversity and Inclusion	0%	8%
Dedicated Equity Staff	0%	8%
Training, Development, and Support	75%	50%
Structures to Build Collaboration	8%	25%
Community Based Organization and Resident Engagement	25%	25%
Partner Across Sectors	17%	33%
Organizational Commitment	8%	17%
Funding and Resource Allocation	8%	17%
Embed Equity Principles	42%	25%
Data Collection and Usage	42%	17%
Shared Analysis	8%	8%
Inclusive Decision-Making	25%	42%

Two of the Greater Sierra Sacramento's competency priorities align with the State: Training, Development, and Support and Inclusive Decision-Making.

There are shifts in the competency priorities from the previous year that provide some changes to the 2023 competency priorities for the GSS region.

- While Training, Development, and Support remains the top competency priority for the region this year, the percentage of LHJs selecting this as a top priority decreases by 25%.
- While not a top priority in 2022, Inclusive Decision-Making is the second highest priority for the region in 2023 with an increase of 17%.
- In 2022, Embed Equity Principles and Data Collection and Usage tied as the second priority (both have a decrease of 17% and 25% respectively in 2023).
- Partner Across Sectors is a new priority in 2023 with a 16% increase from the previous year.

Many of the GSS LHJs express that Training, Development, and Support is a top competency priority and are working with or are in the process of hiring consultants to provide these trainings. Some staff in the GSS region implement required equity trainings and provide additional optional trainings to further deepen the knowledge and understanding of health equity topics. LHJs also mention the importance of expanding equity trainings to all department staff.

Inclusive Decision-Making is the second competency priority of the region. While many LHJs currently collaborate with community partners, others are still evaluating how to include the community in key decision-making related to public health program planning and evaluation.

Finally, the GSS region selects Partner Across Sectors as the third competency priority to continue local development. Many LHJs in the region collaborate with key partners that have similar equity priorities; government agencies, healthcare systems, community-based organizations, schools, and faith-based organizations among others. GSS LHJs are still working, however, on fostering these partnerships to create sustainable relationships.

Greater Sierra Sacramento Strengths

Of the 12 LHJs in Greater Sierra Sacramento, 7 LHJs provided short answers about their organization's equity strengths. Common themes from these answers are as follows:

- LHJs have dedicated health equity staff to focus on advancing equity work forward. This aligns with the GSS results where Dedicated Equity Staff is the most developed competency with a 3.33 average.
- Many of the staff reflect the populations served and understand the importance of strong relationships with the community. Diversity and Inclusion is among the top four most developed competencies for the region with a 2.67 average (tied with Partner Across Sectors).
- Implementing structures are essential to building collaboration and meaningful partnerships. Structures to Build Collaboration is the second most developed competency with an average of 2.75.

Quotes

“Our LHJ's strengths include that we are a hard-working and diverse workforce that reflects our population served. We have a strong commitment to our co-workers and to improving the health of all members of our community. We also are a learning organization and prioritize advancing our knowledge and equity related skills.” -A Greater Sierra Sacramento LHJ

“Small rural community with established relationships allow opportunity to explore and build equity practices.” -Amador County Public Health

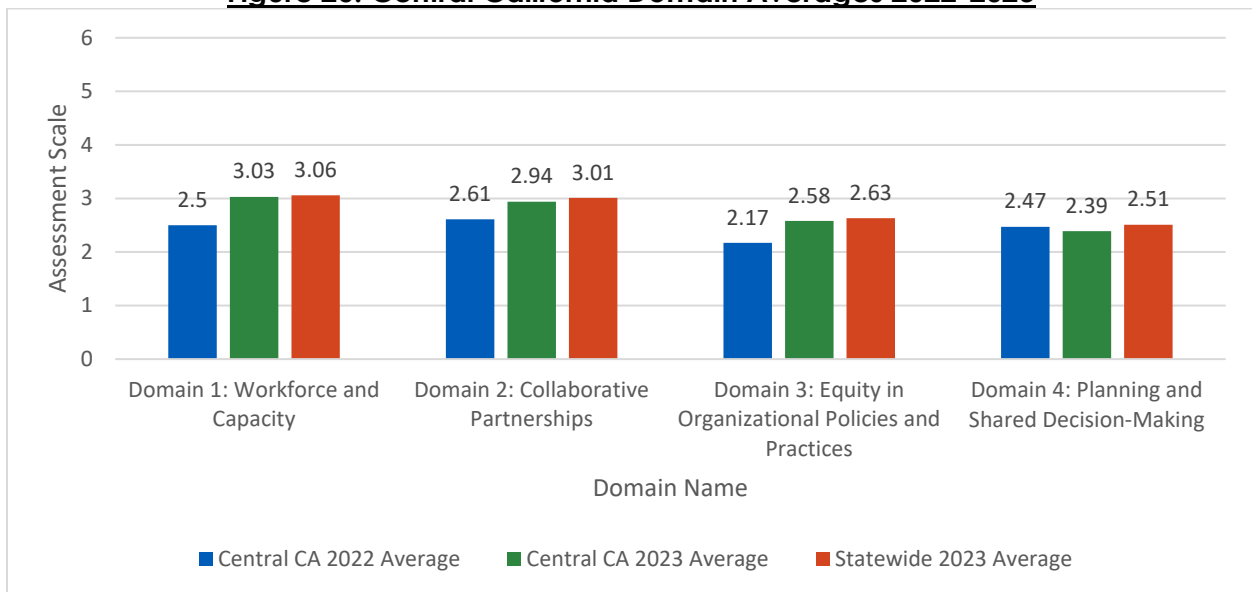
Central California Highlights

The Central California (Central CA) region consists of 11 Local Health Jurisdictions: Calaveras, Kern, Kings, Madera, Mariposa, Merced, San Benito, San Joaquin, Stanislaus, Tulare, and Tuolumne. All 11 LHJs in the region completed the 2023 organizational assessment.

This section outlines key highlights of Central CA's 2023 domain averages, competency averages and priorities, and regional strengths with comparison to 2022 results when applicable.

Central California Domain Averages

Figure 20: Central California Domain Averages 2022-2023



Domain Average Highlights

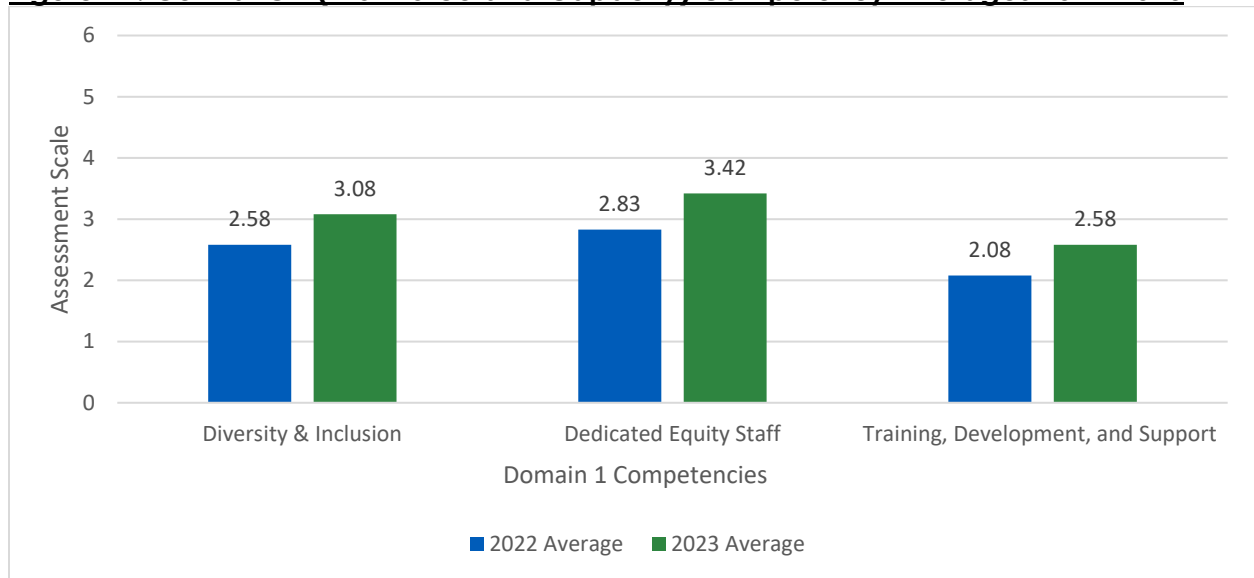
- All four 2023 domain averages for the Central CA region are slightly lower than the statewide averages, the same trend was found in 2022.
- Three of the four domains have an upward progression from 2022.
- Domain 1, now in the Established level (3-4) of development is the most developed domain in 2023 and has the largest improvement from 2022 with a 0.53 average increase.
- Domain 4 is the least developed domain with a 0.08 average decrease in 2023.

Central California Competency Averages

This section examines the three competency averages within each of the four domains. 10 competency averages have an upward progression and two competencies from Domain 4 have a minor downward progression.

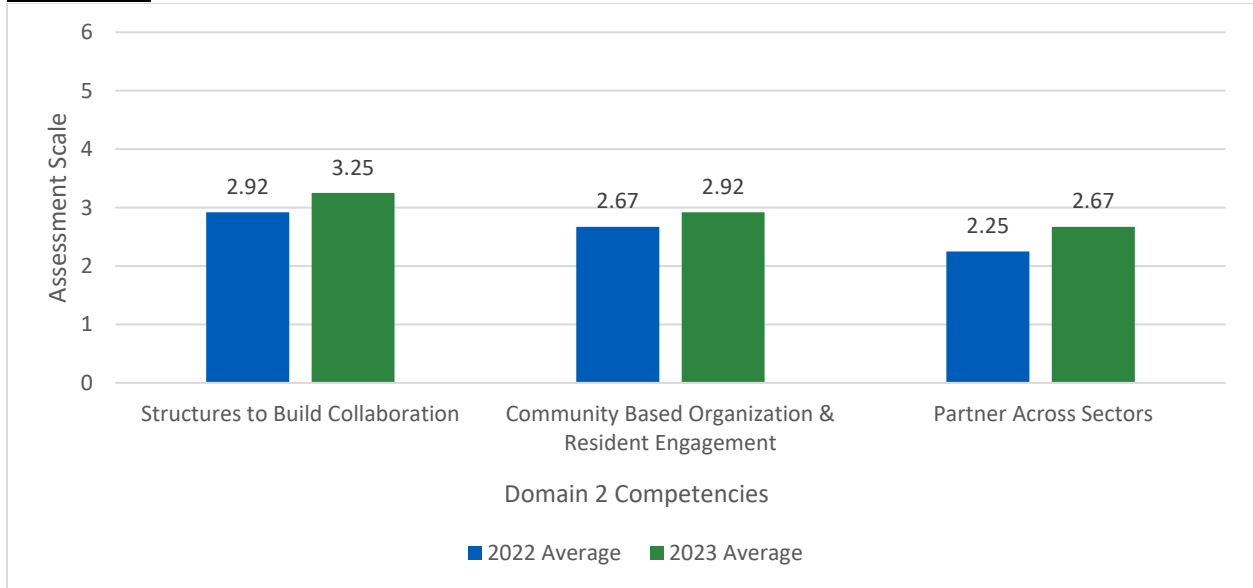
Three competency averages move from an Early level (1-2) of development in 2022 to an Established level (3-4) in 2023. All other competencies remain in the Early level (1-2) of development. Competency averages for the Central CA region are as follows:

Figure 21: Central CA (Workforce and Capacity) Competency Averages 2022-2023



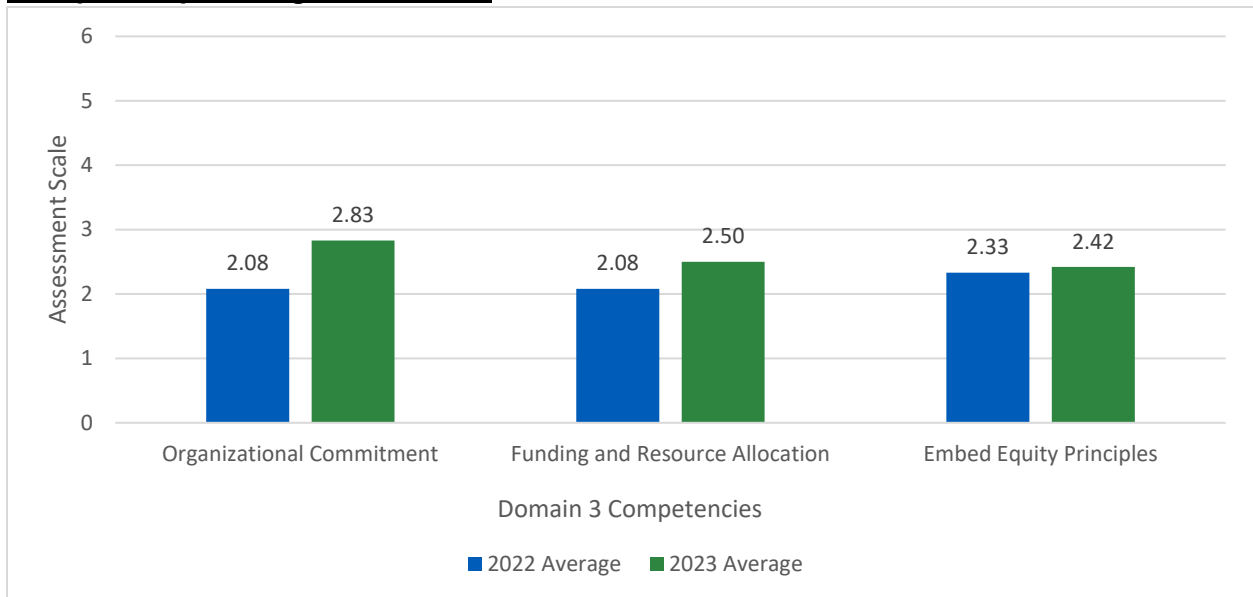
- Dedicated Equity Staff is the most developed competency for the region in 2023 and has the second largest improvement with a 0.59 average increase.
- Diversity and Inclusion and Dedicated Equity Staff shift into the Established level (3-4) of development, making Domain 1 the most developed domain of the region.

Figure 22: Central CA Domain2 (Collaborative Partnerships) Competency Averages 2022-2023



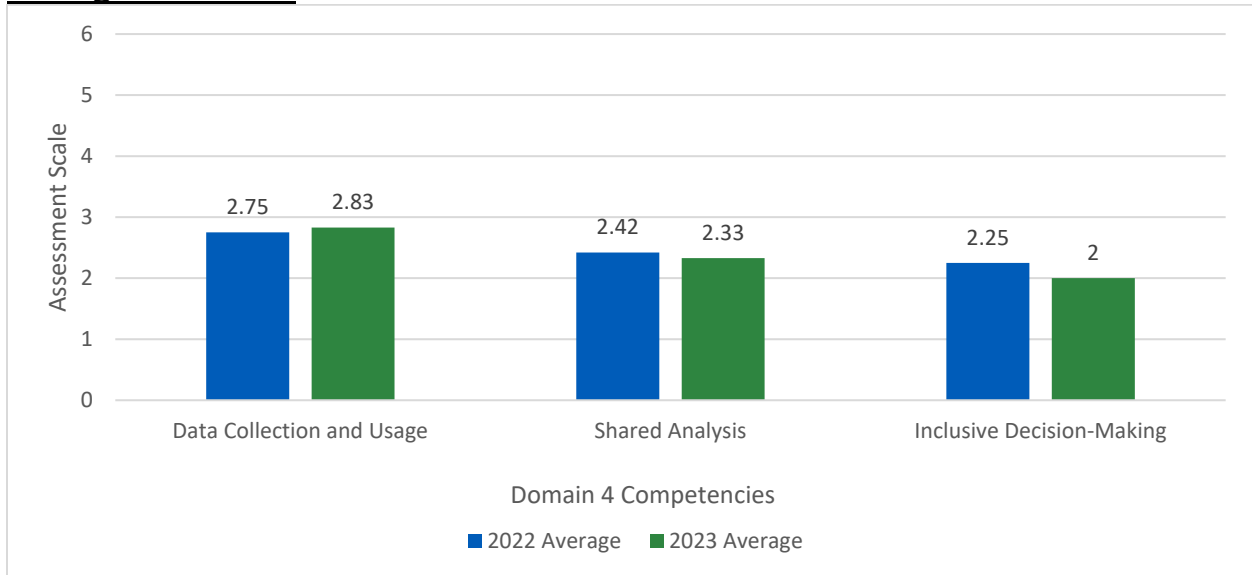
- Structures to Build Collaboration is the only competency in this domain to shift into the Established level (3-4) of development but is closely followed by Community Based Organization & Resident Engagement.

Figure 23: Central CA Domain 3 (Equity in Organizational Policies and Practices) Competency Averages 2022-2023



- Organizational Commitment has the largest improvement in the region with a 0.75 average increase in 2023.

Figure 24: Central CA Domain 4 (Planning and Shared Decision-Making) Competency Averages 2022-2023



- Shared Analysis and Inclusive Decision-Making are the least developed competencies of the region, both with a slight downward progression of a 0.09 and 0.25 average decrease respectively.

See [Appendix 6](#) for a breakdown of 2023 competency averages.

Central California Competency Priorities

Table 4 shows the competency priorities of Central CA LHJs. Each LHJ selected up to three competencies to focus on in 2023. Cells shown in blue are the top three competencies in each year. The percentages represent the number of LHJs that selected the competency as a priority out of the total number of 11 participating LHJs in the region.

Table 4: Central CA Competency Priorities in 2022 & 2023

Competency Name	2022 Percentage (%)	2023 Percentage (%)
Diversity and Inclusion	25%	17%
Dedicated Equity Staff	17%	17%
Training, Development, and Support	75%	67%
Structures to Build Collaboration	0%	8%
Community Based Organization and Resident Engagement	8%	42%
Partner Across Sectors	25%	17%
Organizational Commitment	25%	17%
Funding and Resource Allocation	25%	0%
Embed Equity Principles	33%	50%
Data Collection and Usage	17%	25%
Shared Analysis	8%	0%
Inclusive Decision-Making	33%	33%

Two of the three top competency priorities selected by the Central CA region align with the State: Training, Development, and Support and Embed Equity Principles.

There are shifts in the competency priorities from the previous year that make way for a new competency priority in 2023.

- While Training, Development, and Support remains the top competency priority for the region, the percentage of LHJs selecting this as a top priority decreases by 8%.
- Embed Equity Principles is the second competency priority for the region increasing from the previous year by 17%.
- Community Based Organization and Resident Engagement is a new competency priority with a significant increase of 34% from 2022.
- Another notable shift in competency priorities is with Funding and Resource Allocation which is not selected as a priority by any LHJ in 2023 (25% decrease).

The qualitative assessment data help explain the chosen competency priorities. Central CA LHJs express a need for further Training, Development, and Support to continue equity development in 2023 and beyond. Many of the LHJs in the region are developing Health Equity Plans and leveraging the insights and expertise of subcommittees and taskforces to help identify areas for staff trainings and development. LHJs in the region share a goal of building trust and ensuring inclusion and inclusivity of all staff needs and feedback around equity topics.

Central CA LHJs are working to refine and develop existing and new efforts and strategies to have equity as a foundational starting point. Several LHJs in the region leveraged data from the Baseline Organizational Assessment to garner insights on areas where equity can further be operationalized and uplifted. Central CA LHJs are having honest and ongoing communication with leadership at every stage of planning and development, to embed equity into policies, procedures, and programs.

Finally, the Central CA region selects Community Based Organization and Resident Engagement as the third competency priority even though LHJs are in different development levels in this competency. While some LHJs in the region encounter various challenges like sustaining resident engagement, others experience progress such as gaining new members in their committees and taskforces. Many of the region's LHJs are currently identifying key community partners to collaborate with and others are in the process of working with consultants to develop partnerships. Much of the region's objective is to have community engagement in the development and implementation of Community Health Assessments (CHA) and Community Health Improvement Plans (CHIP) and develop sustainable partnerships.

Central California Strengths

Of the 11 LHJs in the Central CA region, 9 LHJs gave short answers about their organization's equity strengths. Common themes from these answers are as follows:

- Committed Staff working to operationalize Equity at every level. Dedicated Equity Staff is the most developed competency with an average of 3.42.
- Engaging with CBOs and Community Members and gaining valuable insights via meaningful dialogue around needs. Domain 2: Collaborative Partnerships is the second most developed domain in the region.
- Passionate committee and community taskforce members.

Quotes

“Our workforce is diverse and reflective of the population, and we have worked to build collaborative relationships with the community organizations.” -San Benito County

“Our culture is great, and we have amazing staff. Each person is dedicated to their programs and serving the public, and to department goals. I feel like our department has done a great job of making sure that we are very inclusive when it comes to writing our plans, engaging with our community and partners.” -Madera County

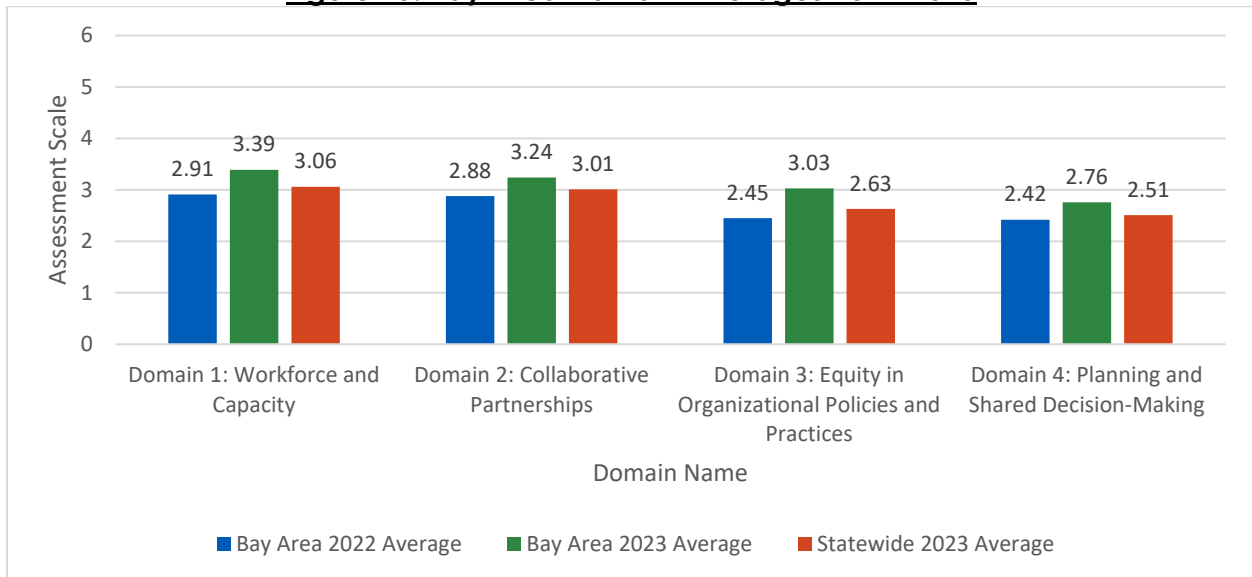
Bay Area Highlights

The Bay Area region consists of 12 Local Health Jurisdictions: Alameda, City of Berkeley, Contra Costa, Marin, Monterey, Napa, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano, and Sonoma. In 2023, 11 out of 12 LHJs in the Bay Area region completed the Organizational Assessment.

This section outlines key highlights of the Bay Area region's 2023 domain averages, competency averages and priorities, and regional strengths with comparison to 2022 results when applicable.

Bay Area Domain Averages

Figure 25: Bay Area Domain Averages 2022-2023



Domain Average Highlights

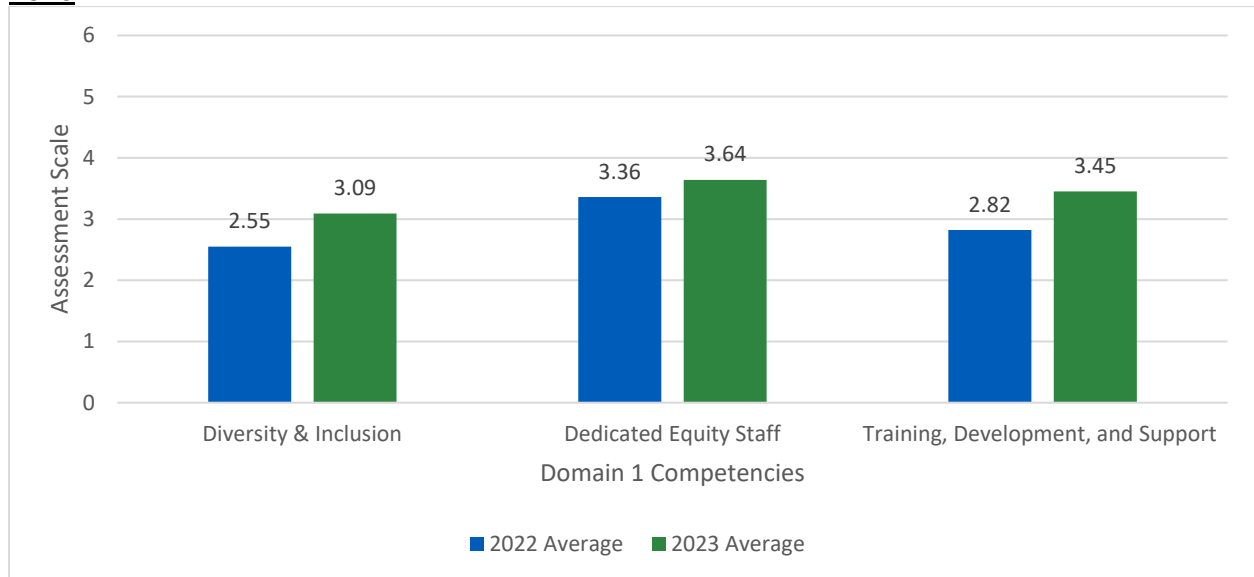
- All four 2023 domain averages for the Bay Area are a little higher than statewide averages, indicating slightly further development in equity competencies. This trend was found in 2022 as well.
- All four domains have an upward progression from 2022.
- Domains 1, 2, and 3 shift into the Established level (3-4) of development in 2023.
- In both years, Domain 1 is the most developed domain.
- In both years, Domain 4 is the least developed domain and in 2023 has the least improvement with a 0.34 average increase.

- Domain 3 has the largest improvement from 2022 with a 0.58 average increase.

Bay Area Competency Averages

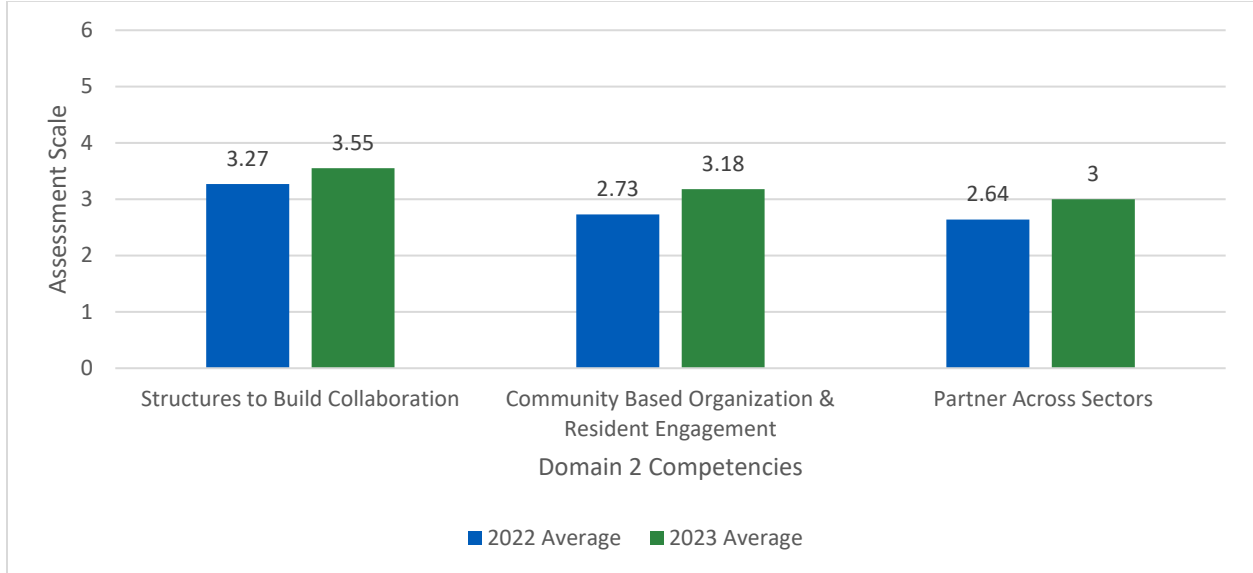
This section examines the three competency averages within each of the four domains. All 12 competency averages have an upward progression in one year. Eight competencies are in the Established level (3-4) of development. Two competency averages were already in the Established level (3-4) and six competency averages shift from an Early level (1-2) in 2022 to an Established level (3-4) in 2023. The remaining four competencies improve but remain in the Early level (1-2). Competency averages for the region are as follows:

Figure 26: Bay Area Domain 1 (Workforce and Capacity) Competency Averages 2022-2023



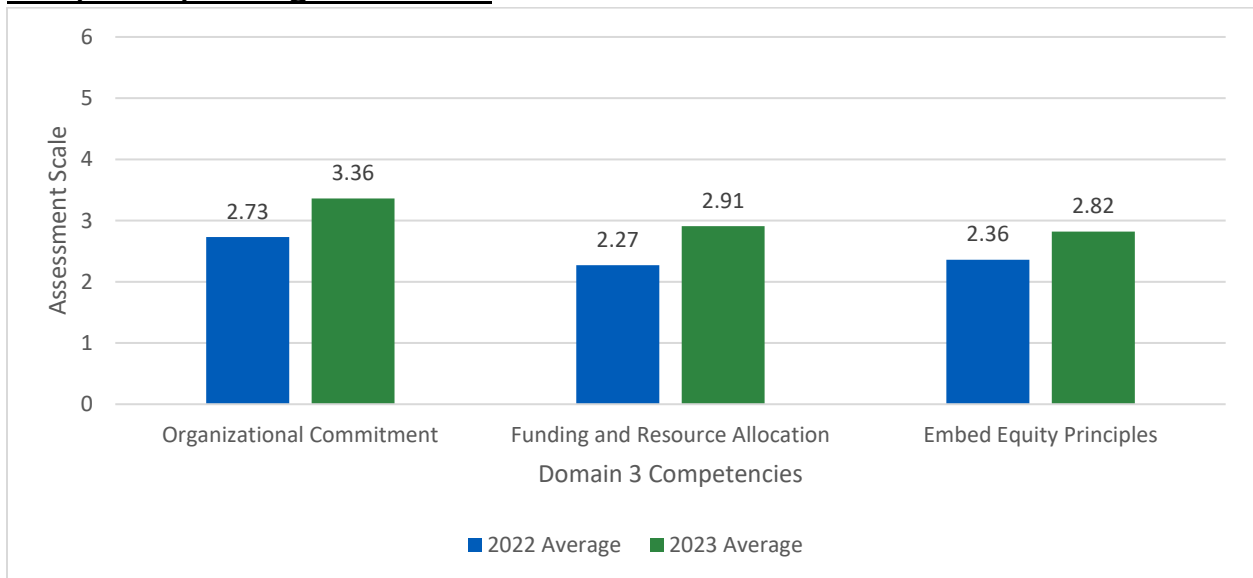
- Dedicated Equity Staff continues to be the most developed competency.
- All three competencies are in the Established level (3-4).
- Training, Development, and Support (0.63 average increase) and Diversity & Inclusion (0.54 average increase) have two of the largest average increases of the region.

Figure 27: Bay Area Domain 2 (Collaborative Partnerships) Competency Averages 2022-2023



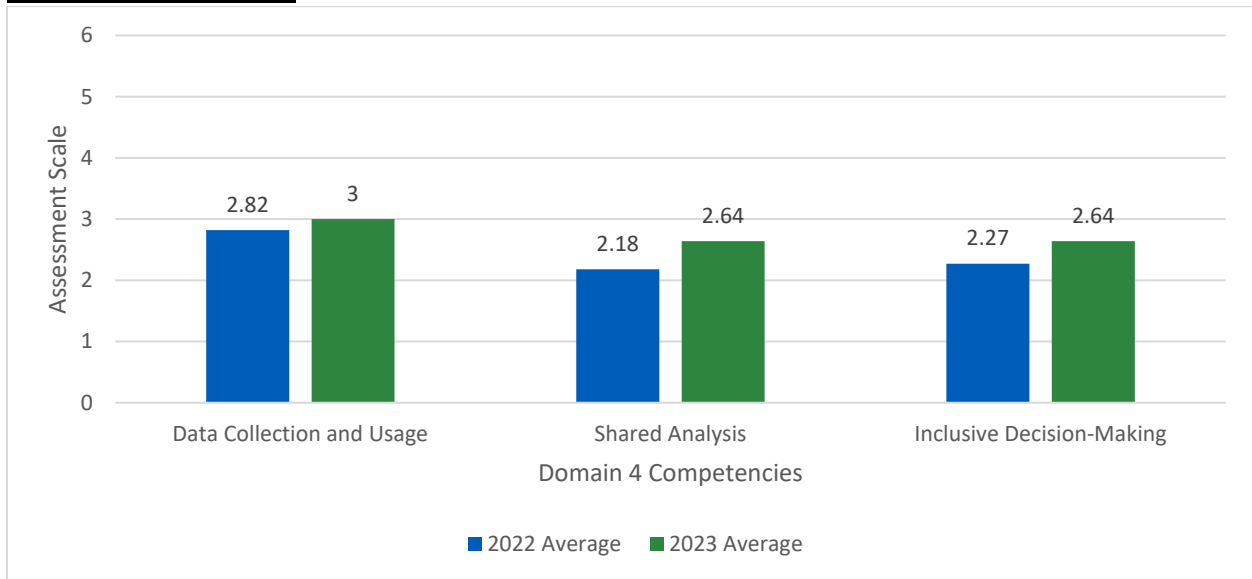
- Community Based Organization & Resident Engagement and Partner Across Sectors move from the Early level (1-2) to the Established level (3-4); now all three competencies are in the Established level (3-4) of development.

Figure 28: Bay Area Domain 3 (Equity in Organizational Policies and Practices) Competency Averages 2022-2023



- Funding and Resource Allocation has the largest improvement in the Bay Area with a 0.64 average increase and is close to moving into the Established level (3-4).
- Organizational Commitment moves into the Established level (3-4) and has the second largest improvement with a 0.63 average increase (the same as Training, Development, and Support (from Domain 1)).

Figure 29: Bay Area Domain 4 (Planning and Shared Decision-Making) Competency Averages 2022-2023



- Shared Analysis and Inclusive Decision-Making continue to be the least developed competencies.
- Data Collection and Usage has the least improvement in the region with a 0.18 average increase but moves into the Established level (3-4).

See [Appendix 7](#) for a breakdown of 2023 competency averages.

Bay Area Competency Priorities

Table 5 shows the competency priorities of LHJs in the region. Each LHJ selected up to three competencies to focus on in 2023. Cells shown in blue are the top competencies in each year. The percentages represent the number of LHJs that selected the competency as a priority out of the total number of 11 participated LHJs in the region.

Table 5: Bay Area Competency Priorities in 2022 & 2023

Competency Name	2022 Percentage (%)	2023 Percentage (%)
Diversity and Inclusion	27%	9%
Dedicated Equity Staff	18%	0%
Training, Development, and Support	27%	55%
Structures to Build Collaboration	9%	18%
Community Based Organization and Resident Engagement	27%	36%
Partner Across Sectors	27%	18%
Organizational Commitment	9%	0%
Funding and Resource Allocation	18%	36%
Embed Equity Principles	27%	9%
Data Collection and Usage	18%	27%
Shared Analysis	18%	18%
Inclusive Decision-Making	55%	45%

Two of the Bay Area's competency priorities align with that of the State: Training, Development, and Support and Inclusive Decision-Making.

Changes in the competency priorities from the previous year now provide more definition of 2023 priorities.

- Training, Development, and Support is the new top competency priority for the region, with last year's top priority of Inclusive Decision-Making now coming in second.
- Community Based Organization and Resident Engagement remains a top priority and ties with Funding and Resource Allocation; a new 2023 priority.
- Diversity and Inclusion; Partner Across Sectors; and Embed Equity Principles are not among the top priorities this year.

In 2023, many LHJs in the region express a need to expand current training and development opportunities to ensure more diversity and inclusivity of all staff, and some LHJs are taking measures such as outsourcing consultants to develop foundational trainings and equity frameworks. Additionally, with the region's selection of Inclusive Decision-Making as the second competency priority, many Bay Area LHJs state that minimal opportunities exist to engage stakeholders in key decision-making, and that the input of community members is often missing or not captured fully.

Closely aligned with Inclusive Decision-Making, Community Based Organization and Resident Engagement is another competency priority for the Bay Area region. While nearly half of the Bay Area LHJs are establishing relationships with residents and Community Based Organizations, some are encountering

challenges in forming partnerships and face community distrust and minimal community participation because of language barriers. Several Bay Area LHJs indicate a need for consistent and active engagement strategies that incorporate an equitable lens with local agencies and smaller organizations.

Community Based Organization and Resident Engagement also requires funding support. To continue the momentum of equity infrastructure progress, the Bay Area region selects Funding and Resource Allocation as a newly identified competency priority. Across the region, many LHJs emphasize limitations and concerns of short-term funding, cumbersome local processes (including recruiting and hiring, Request for Proposals [RFPs], and limited ways to honor community participation through incentives), and insufficient divisional buy-in and transparency to equitably distribute resources. The Funding and Resource Allocation competency does, however, have the largest improvement in a year.

Bay Area Strengths

Of the 12 LHJs in the Bay Area region, 11 LHJs provided short answers about their organization's equity strengths. Common themes from these answers are as follows:

- More than half of the Bay Area LHJs have a dedicated Equity Lead or Equity Officer on board and have expanded staff to support and advance equity. Dedicated Equity Staff is the region's most developed competency (3.64).
- A vast majority of the Bay Area region feels their organization has a commitment to equity and is making efforts to ensure equity is implemented consistently throughout internal and external programs. Organizational Commitment (3.46) is among the region's top four most developed competencies.
- Nearly all Bay Area LHJs form and/or establish relationships and partnerships with CBOs and residents. CBO & Resident Engagement (3.18) is among the top five most developed competencies.

Quotes

"[Our] commitment to health equity, coupled with a very involved community makes it a strong, mission-driven department that is dedicated to serving the most vulnerable community members." -City of Berkeley

"We have high level (BOS and executive leadership) support for internal DEI work. Without executive level support nothing will move forward. That support is now visibly moving towards action." -Contra Costa County

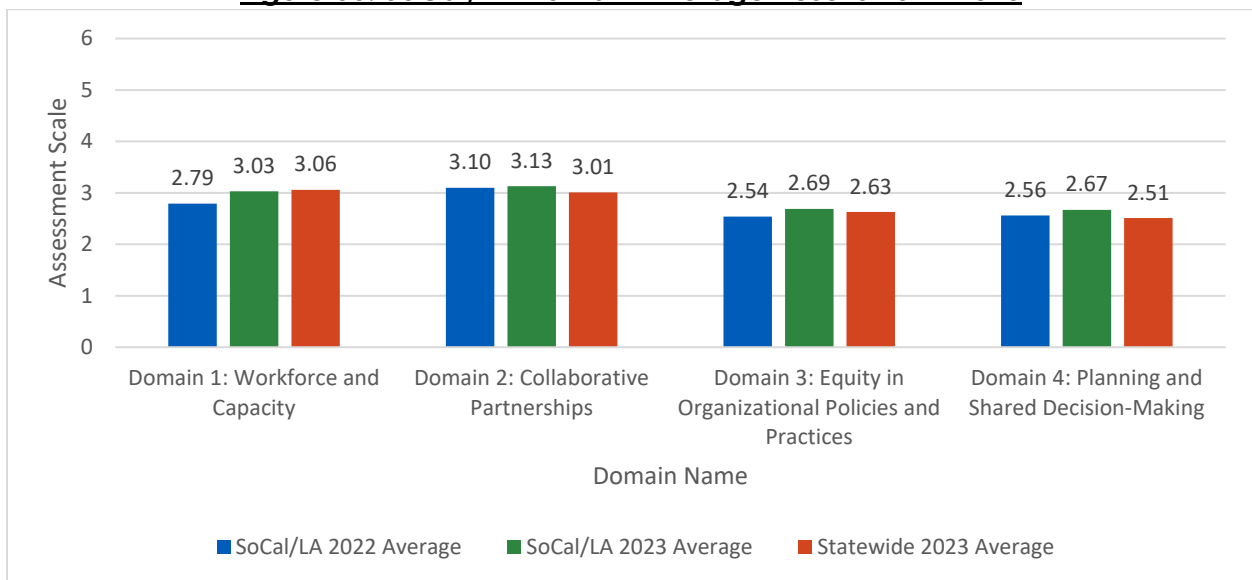
Southern California/Los Angeles Highlights

The Southern California/Los Angeles (SoCal/LA) region consists of 13 Local Health Jurisdictions: Mono, Inyo, San Bernardino, Riverside, Imperial, San Diego, Orange, Los Angeles, Long Beach City, Pasadena City, Ventura, Santa Barbara and San Luis Obispo. All 13 LHJs in the region completed the 2023 organizational assessment.

This section will outline key highlights of the SoCal/LA region’s 2023 domain averages, competency averages and priorities, and regional strengths with comparison to 2022 results when applicable.

Southern California/Los Angeles Domain Averages

Figure 30: SoCal/LA Domain Average Results 2022-2023



Domain Average Highlights

- All four domains have an upward progression from 2022.
- Three out of the four 2023 domain averages for the SoCal/LA region are slightly higher than statewide averages, indicating somewhat further development in equity competencies. Comparatively, in 2022, the region scored higher than the state in all four domains.
- Domain 1 shifts into the Established level (3-4) of development in 2023 and has the largest improvement with a 0.24 average increase.
- In both years, Domain 2 is the most developed domain.

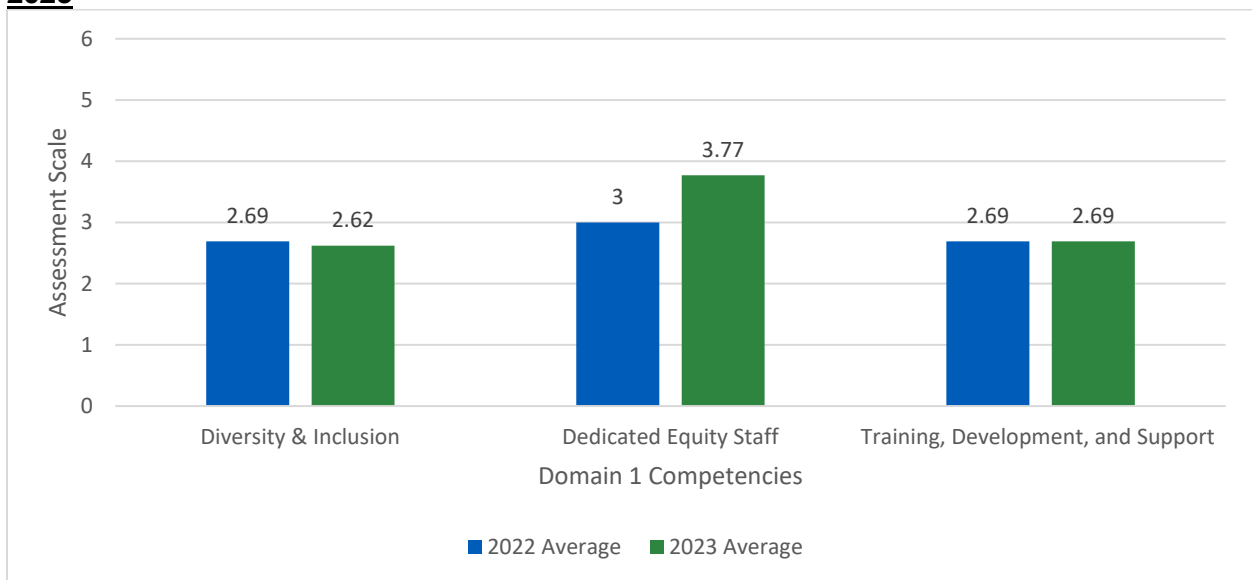
- In 2023, Domain 4 is the least developed domain, only slightly below Domain 3 which was the least developed in 2022.

Southern California/Los Angeles Competency Averages

This section examines the three competency averages within each of the four domains. Nine out of 12 competencies have an upward progression, two competencies have a slight downward progression, and one competency remains unchanged.

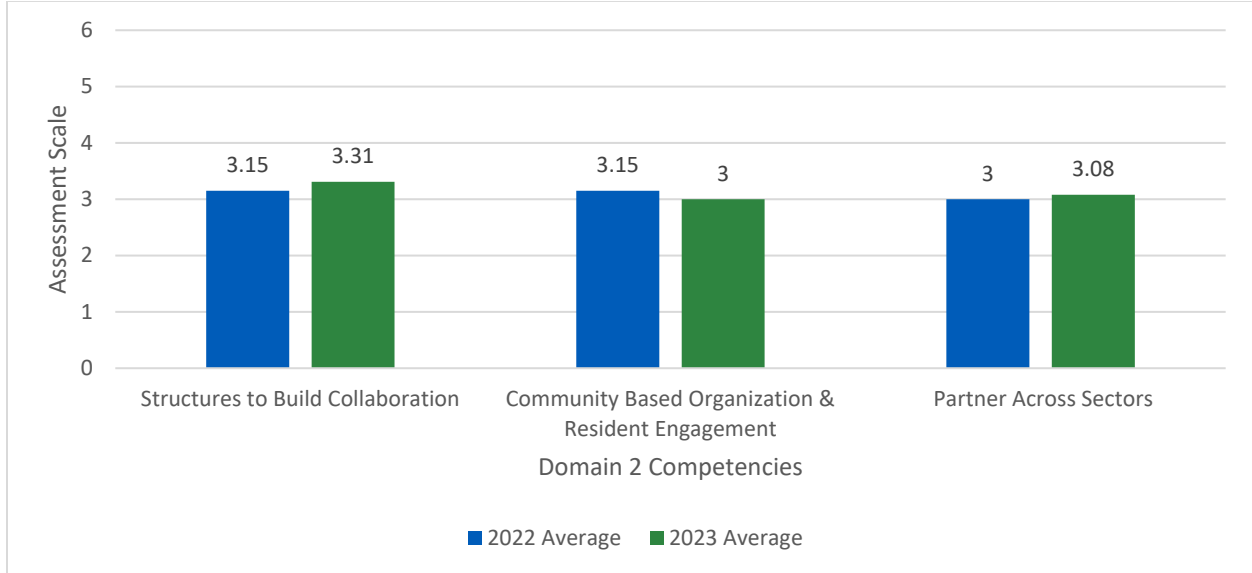
Six competency averages are in the Early level (1-2) of development and the other six competency averages are in the Established level (3-4) of development. Competency averages for the region are as follows:

Figure 31: SoCal/LA Domain 1 (Workforce and Capacity) Competency Averages 2022-2023



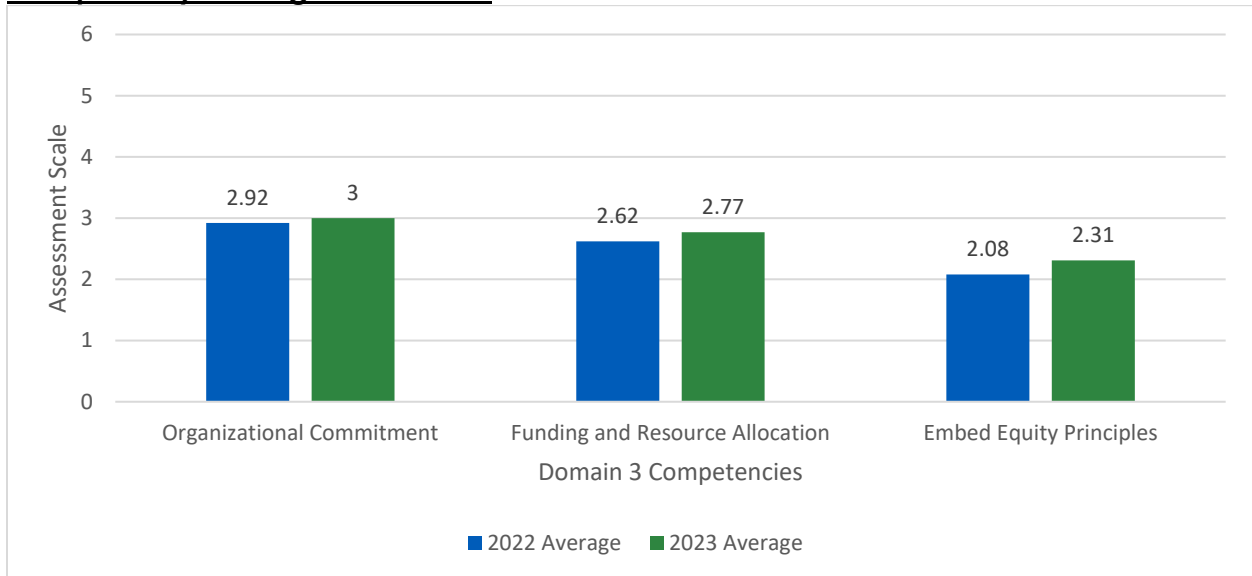
- Dedicated Equity Staff continues to be the most developed competency in the region in 2023. This competency also has the largest improvement in the region with a 0.77 average increase.
- Diversity & Inclusion is one of the two competencies that has a downward progression with a 0.07 average decrease.
- Training, Development, & Support remains unchanged.

Figure 32: SoCal/LA Domain 2 (Collaborative Partnerships) Competency Averages 2022-2023



- All three competencies remain in the Established level (3-4) of development making Domain 2 the most developed domain in the region.
- Community Based Organization & Resident Engagement is one of two competencies that has a downward progression with a 0.15 average decrease.

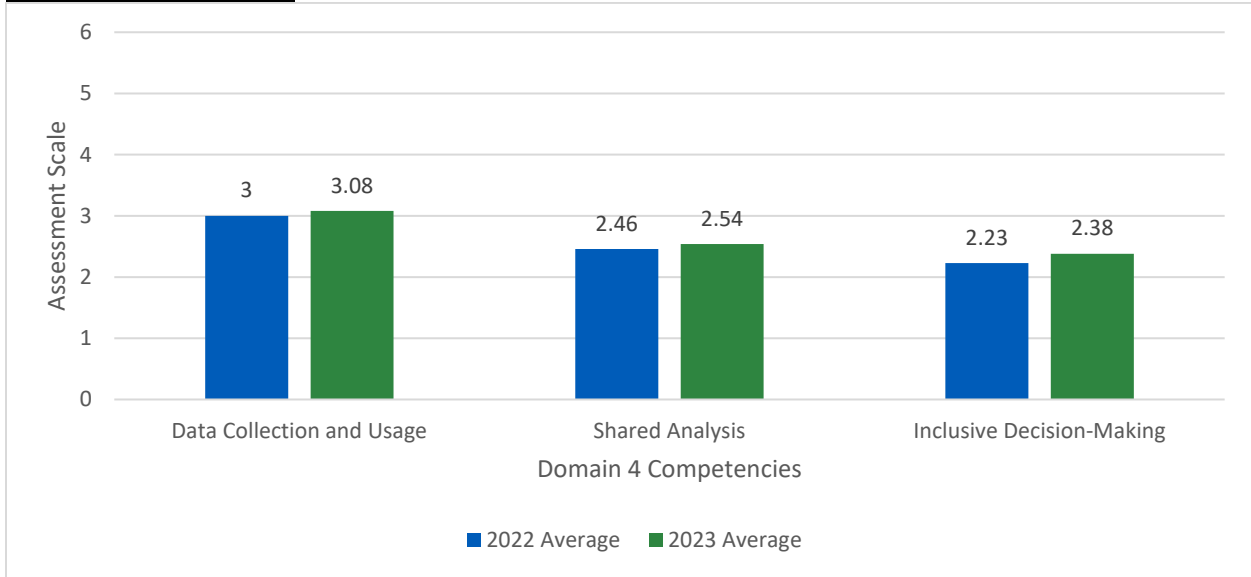
Figure 33: SoCal/LA Domain 3 (Equity in Organizational Policies and Practices) Competency Averages 2022-2023



- Organizational Commitment shifts into the Established level (3-4) in 2023 with a 0.08 average increase from 2022.

- Embed Equity Principles continues to be the least developed competency but has a 0.23 average increase.

Figure 34: SoCal/LA Domain 4 (Planning and Shared Decision-Making) Competency Averages 2022-2023



- Data Collection and Usage remains in the Established level (3-4) of development with a 0.08 average increase.
- Shared Analysis and Inclusive Decision-Making remain in the Early level (1-2) of development but improve slightly in 2023.

See [Appendix 8](#) for a breakdown of 2023 competency averages.

Southern California/Los Angeles Competency Priorities

Table 6 shows the competency priorities of LHJs in the region. Each LHJ selected up to three competencies to focus on in 2023. Cells shown in blue are the top three competencies in each year. The percentages represent the number of LHJs that selected the competency as a priority out of the total 13 participating LHJs in the region.

Table 6: SoCal/LA Competency Priorities in 2022 & 2023

Competency Name	2022 Percentage (%)	2023 Percentage (%)
Diversity and Inclusion	0%	23%
Dedicated Equity Staff	23%	8%
Training, Development, and Support	77%	62%
Structures to Build Collaboration	23%	23%
Community Based Organization and Resident Engagement	23%	23%
Partner Across Sectors	8%	0%
Organizational Commitment	8%	15%
Funding and Resource Allocation	15%	8%
Embed Equity Principles	54%	54%
Data Collection and Usage	0%	15%
Shared Analysis	8%	15%
Inclusive Decision-Making	46%	46%

All three of SoCal/LA region's competency priorities align with that of the State: Training, Development, and Support; Embed Equity Principles; and Inclusive Decision-Making.

The region remains the most consistent in its competency priorities. There are no shifts in the top three competency priorities selected from 2022, however, there are shifts of interest to note:

- Training, Development, and Support remains the top competency priority for the region but decreases by 15%.
- Embed Equity Principles and Inclusive Decision-Making remain unchanged from 2022 as top priorities in 2023.
- Although not the top three competency priorities, Diversity and Inclusion and Data Collection and Usage did increase from 0% in 2022 to 23% and 15% respectively in 2023. Dedicated Equity Staff on the other hand, decreases by 15%.

The SoCal/LA region selects Training, Development, and Support as their primary competency priority. A majority of the region prioritizes workforce development so that staff can enhance their knowledge of equity principles and implement learning into respective strategies. Additionally, some LHJs in the region are creating an equity learning series that highlights various training topics (e.g. data equity, implicit bias, power building, racial justice and equity, diversity training, and culturally and linguistically appropriate services). LHJs also desire to continue expanding local staff knowledge of health equity principles through more

advanced trainings and express ambition to attain new skills through a variety of learning styles and formats.

Embed Equity Principles is another competency priority of the SoCal/LA region. Several LHJs continue to embed equity throughout their organization's programs, plans, policies, and procedures but still consider themselves to be in the Early level (1-2) of development. Strong leadership support is still needed to center equity and assure alignment with organizational goals, policies, and values.

Finally, the SoCal/LA region selects Inclusive Decision-Making as the third competency priority. Comments indicate that several LHJs in the region attempt to include communities most impacted by inequities in decision-making processes (e.g. forming Community Advisory Committees with wide representation), but encounter challenges of language accessibility, meeting fatigue, and participant turnover, ultimately limiting meaningful community participation. LHJs also emphasize the importance of maintaining open and transparent communication with communities and continue to do so while grappling with little community attendance. The region aims to continue exploring and implementing more inclusive approaches to engage community members and other partners.

Southern California/Los Angeles Strengths

Of the 13 LHJs in SoCal/LA, 7 LHJs gave short answers about their organizational equity strengths. Common themes from these answers are as follows:

- Onboarding dedicated equity staff. This aligns with Dedicated Equity Staff being the most developed competency with a 3.77 average.
- Leadership support and commitment to advance health equity. Organizational Commitment is among the region's top five most developed competencies with a 3.0 average.
- Diverse workforces that reflect the communities they serve. Diversity and Inclusion is a competency that this year was chosen as a priority by 23% of LHJs in the region in comparison to 0% in 2022.
- New funding streams to invest in equity practices. There might be correlation to CDPH administered grants like the California Equitable Recovery Initiative (CERI), the California Strengthening Public Health Infrastructure (CASPHI), and the Future of Public Health (FoPH).
- The use and collection of community-level data to inform and assess decision-making. The region has the highest average for Data Collection and Usage in the state with a 3.08 average.

Quotes

“Onboarding three Commitment to Health Equity program staff is a huge strength for our department. Programs and Leadership team have made an intentional effort and commitment to centering health equity in the work of all programs and some departmental practices. Improvement towards staff's willingness (with Leadership support) to center health equity in the work of all programs & building external relationships is an ongoing effort...” -Pasadena City

“The Department's strengths include having an established office of equity with two equity staff onboarded, leadership's support and commitment to operationalizing equity at all levels of the department, having a diverse workforce that represents the community we serve, leading and participating in a variety of collaborations with CBOs, public and private sector partners as well as community leaders” -Imperial County

Conclusion & Next Steps

The 2023 Organizational Assessment for Equity Infrastructure Results demonstrate the immense progress that has taken place in California and the opportunity to continue building equity infrastructure at the statewide, regional, and local level. The regional results showcase some of the strengths and challenges of each region. While each region is closely aligned with the state, there are differences in competency priorities and competency averages that reflect the special needs of each group; some competency priority shifts correlate with competency averages that mostly improved but a few have a modest downward progression. Regional results can be used to help elaborate region-specific technical assistance that can ultimately improve statewide capacity.

While statewide results do not reveal the regions' nuances, they do paint a picture of how we are moving as a state, the time and effort needed for any type of progress to happen, and resources that might be useful for all LHJs. California improved in all 12 competency averages with Dedicated Equity Staff taking a clear lead with a state average of 3.53 and moving in the Established level (3-4) of development. This improvement correlates with the added funding from the state that is dedicated to equity and requires an equity lead to be hired in each of the 47 LHJs that accepted the CERI grant.

The only other competency to have moved into the Established level (3-4) of development is Structures to Build Collaboration with a state average of 3.19. All other competencies saw improvement but remain in the Early level (1-2) of development, although there are many other competencies on the cusp of development levels leaning toward a 3. The least developed competency is Shared Analysis with a state average of 2.32 followed by Embed Equity Principles (2.41) and Inclusive Decision-Making (2.41) that both were selected as top competency priorities by LHJs along with Training, Development, and Support (the top selected priority by LHJs). This information can help inform the future content of equity technical assistance from the California Department of Public Health. The goal is to find a balance between providing equity TA that develops existing LHJ strengths and equity TA that addresses the greatest needs of LHJs.

Since the release of the Baseline Organizational Assessment for Equity Infrastructure results report, the Equity TA team has solicited periodic feedback from partners and modified TA services to better fit the needs and goals of LHJs. The Equity team will continue to provide and update equity technical assistance for all local health jurisdictions in 2024.

The existing Equity Menu of Services (a full version can be found in the [Equity Lead Onboarding Guide](#)) will continue into 2024 as follows:

- [Monthly Office Hours](#) to provide support, share resources, and foster a collaborative learning environment among local peers on topics they identify as local, regional, and state priorities.
- A monthly [newsletter](#) to share relevant news and resources, as well as spotlight best practices and success stories on equity development.
- An online [Equity Portal](#) for LHJs to submit inquiries and find resources on various topics related to equity.
- **Forums**, a feature built within the Equity Portal designed as a tool to enhance peer to peer communication and knowledge sharing among LHJs and community partners.
- An updated [Virtual Toolkit 2.0](#) to provide curated resources for each development level (Early, Established, Strong) of the 12 competencies from the assessment and ultimately aid local work and inclusion of these competencies to build equity infrastructure.
- **Regional Technical Assistance** delivered by five organizations with ample experience in each of the 5 regions¹. These partners have direct experience in the community and will address region-specific needs and concerns and work in partnership with the CDPH Equity TA team through May 2024.

The Equity TA Team will continue to develop resources and conduct optional consultations with each LHJ to review their individual results and the competencies they would like to focus on. The annual assessment can help monitor the progress, needs, and successes of each LHJ, region, and state. With the assessment results, the Office of Health Equity aims to equip LHJs with relevant tools and strategies to increase their equity capacity and infrastructure. Equity work is long and arduous, but progress is being made for the health of all California.

¹ The five organizations are: the California Center for Rural Policy (CCRP) for Northern California, California for Health (CA4Health) for Greater Sierra Sacramento, the Central California Public Health Consortium (CCPHC) for Central California, the Bay Area Regional Health Inequities Initiative (BARHII) for the Bay Area, and the Public Health Alliance of Southern California (The Alliance) for Southern California.

Appendix 1: Organizational Assessment for Equity Infrastructure

Access the Organizational Assessment and other pertinent resources on the [Organizational Assessment for Equity Infrastructure](#) page.

Appendix 2: Domain and Competency Definitions

	Domain 1: Workforce and Capacity
Diversity & Inclusion	Recruit, hire, and develop a professional workforce that reflects the populations served and communities facing health inequities.
Dedicated Equity Staff	Hire staff dedicated to equity and establish staff capacity centered on equity.
Training, Development, and Support	Provide opportunities for staff to learn and discuss equity topics and incorporate their learning into practice.
	Domain 2: Collaborative Partnerships
Structures to Build Collaboration	Establish vehicles and venues to support/develop meaningful collaboration.
Community Based Organization (CBO) & Resident Engagement	Build trust with the community/residents through transparent and inclusive communication, respectful co-learning, and leveraging community expertise to inform equitable practices.
Partner Across Sectors	Collaborate with other agencies and organizations across sectors to amplify equity and address the root causes related to the environmental, social, and economic conditions which impact health (social determinants of health).
	Domain 3: Equity in Organizational Policies & Practices
Organizational Commitment	Organizational commitment to equity (race/ethnicity, disability status, age, socioeconomic status, etc.) is seen and felt internally and externally; reinforced in culture and communication.
Funding and Resource Allocation	Strategically direct staff resources and funding to build organizational capacity to address equity and to focus resources on ways that benefit communities experiencing greatest inequities.
Embed Equity Principles	Integrate equity principles throughout the organization's programmatic and operational plans, policies, and procedures, including budget, human resources, procurement, data, and decision-making.

No Data	Domain 4: Planning & Shared Decision-Making
Data Collection and Usage	Collect data to reflect the experience of communities impacted by inequities and make it accessible to the community for shared use in policy and program planning.
Shared Analysis	Conduct shared analysis with staff, multisector partners, and community/residents to explore the root causes of problems and co-develop strategies and solutions.
Inclusive Decision-Making	Include community members/residents and stakeholders in key decisions about program, policy planning, and evaluation activities.

Appendix 3: Statewide 2023 Competency Results

The bar graphs below show the number of LHJs throughout CA that selected a score from the scale (below) of 1-6 for each competency. For example, in Figure 35, 20 LHJs out of 59 selected a “2” for the competency Diversity & Inclusion.

Early		Established		Strong	
1	2	3	4	5	6
Not yet, or learning stage	Planned but not started or in initial/pilot stages of implementation	Working towards this but not fully achieved	Fully achieved	In place with evidence of its use (e.g., policies, procedures, robust evaluation plan)	Practices are sustainable and ongoing and may be shared with others as “best practices”

Figure 35: Statewide Domain 1 (Workforce and Capacity) Competency Results for 2023

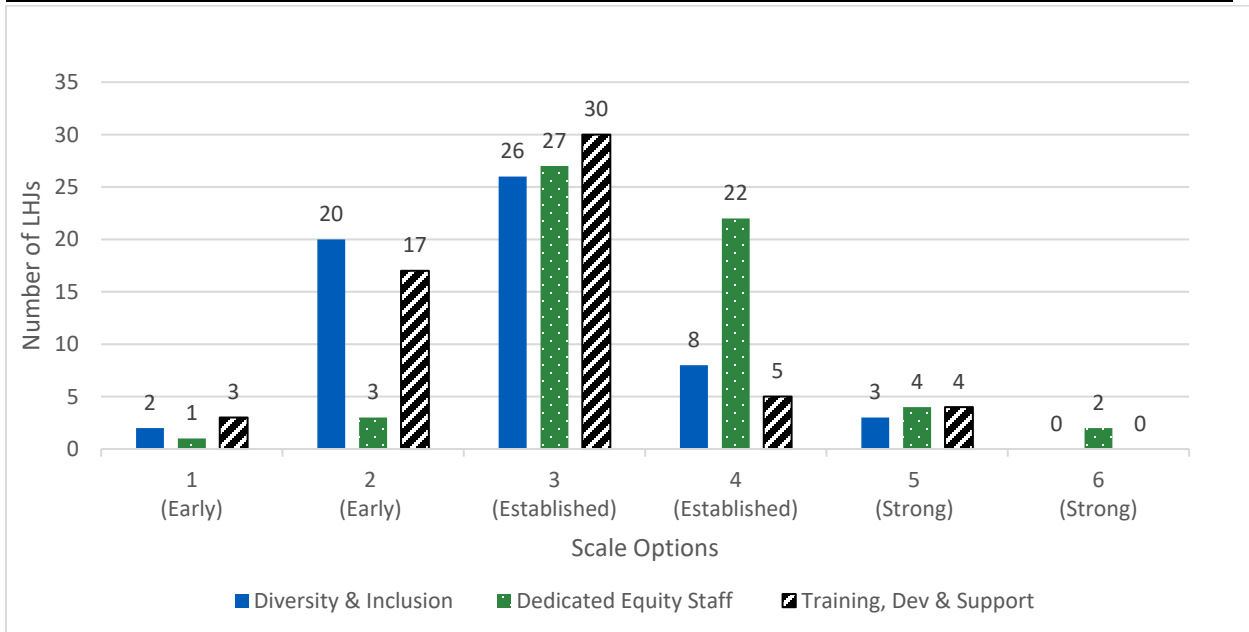


Figure 36: Statewide Domain 2 (Collaborative Partnerships) Competency Results for 2023

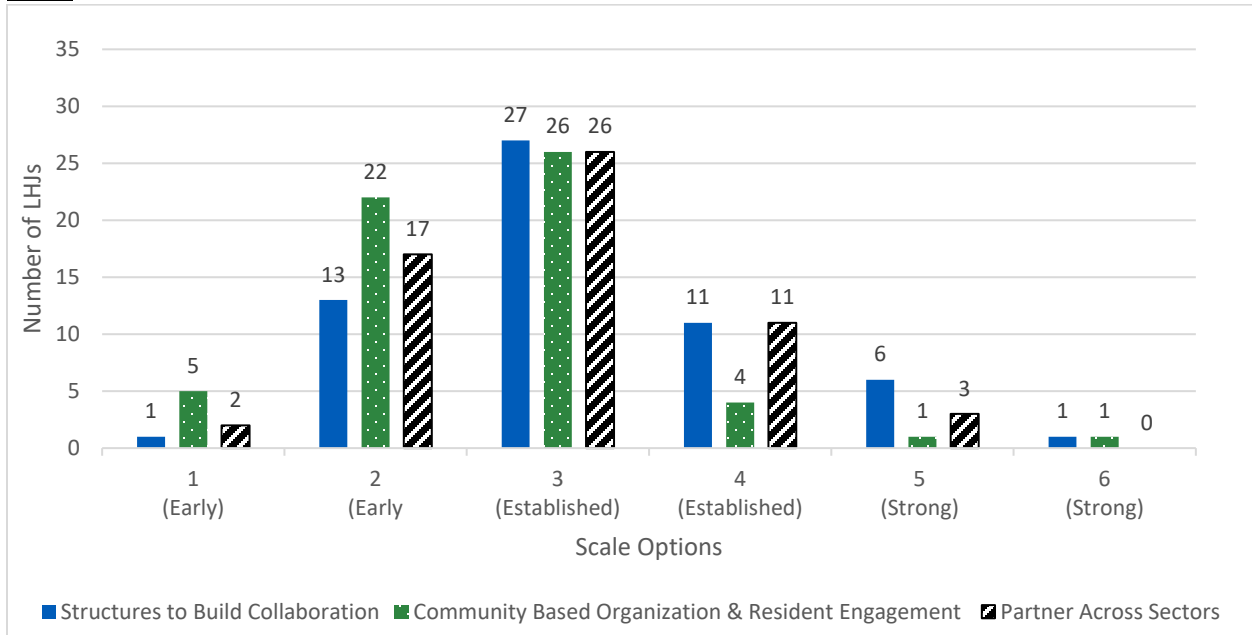


Figure 37: Statewide Domain 3 (Equity in Organizational Policies and Practices) Competency Results 2023

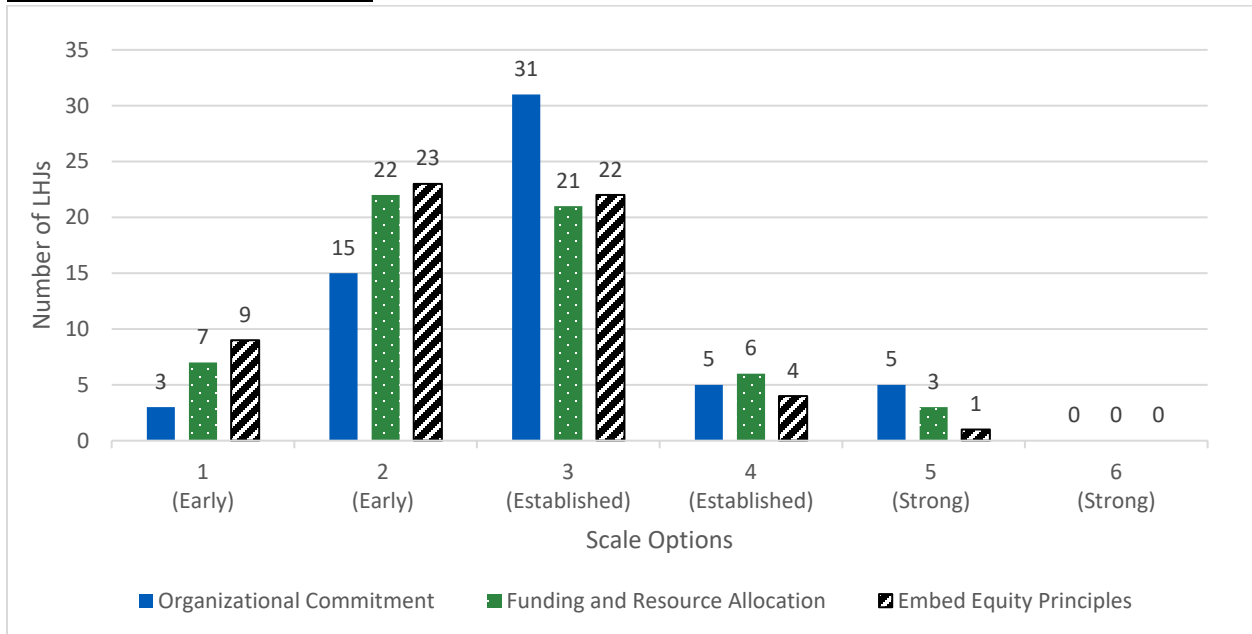
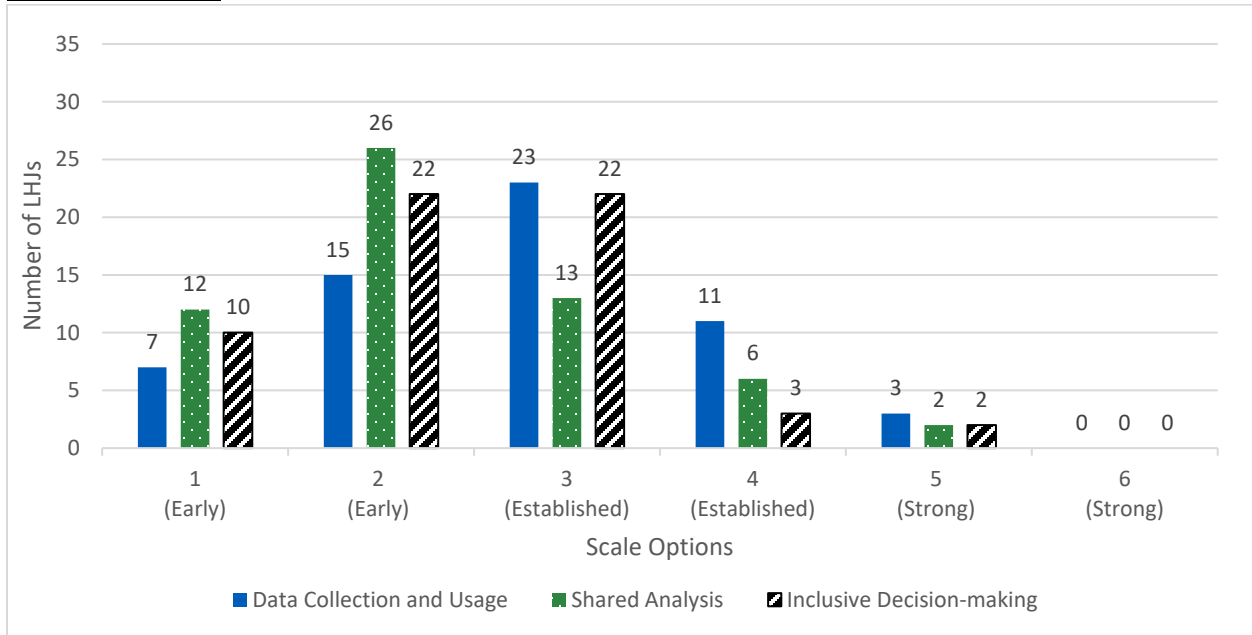


Figure 38: Statewide Domain 4 (Planning and Shared Decision-Making) Competency Results for 2023



Appendix 4: Rural North 2023 Competency Results

The bar graphs below show the number of LHJs throughout the Rural North region that selected a score from the scale (below) of 1-6 for each competency. For example, in Figure 39, 3 LHJs out of 11 selected a “2” for the competency Diversity & Inclusion.

Early		Established		Strong	
1	2	3	4	5	6
Not yet, or learning stage	Planned but not started or in initial/pilot stages of implementation	Working towards this but not fully achieved	Fully achieved	In place with evidence of its use (e.g., policies, procedures, robust evaluation plan)	Practices are sustainable and ongoing and may be shared with others as “best practices”

Figure 39: Rural North Domain 1 (Workforce and Capacity) Competency Results for 2023

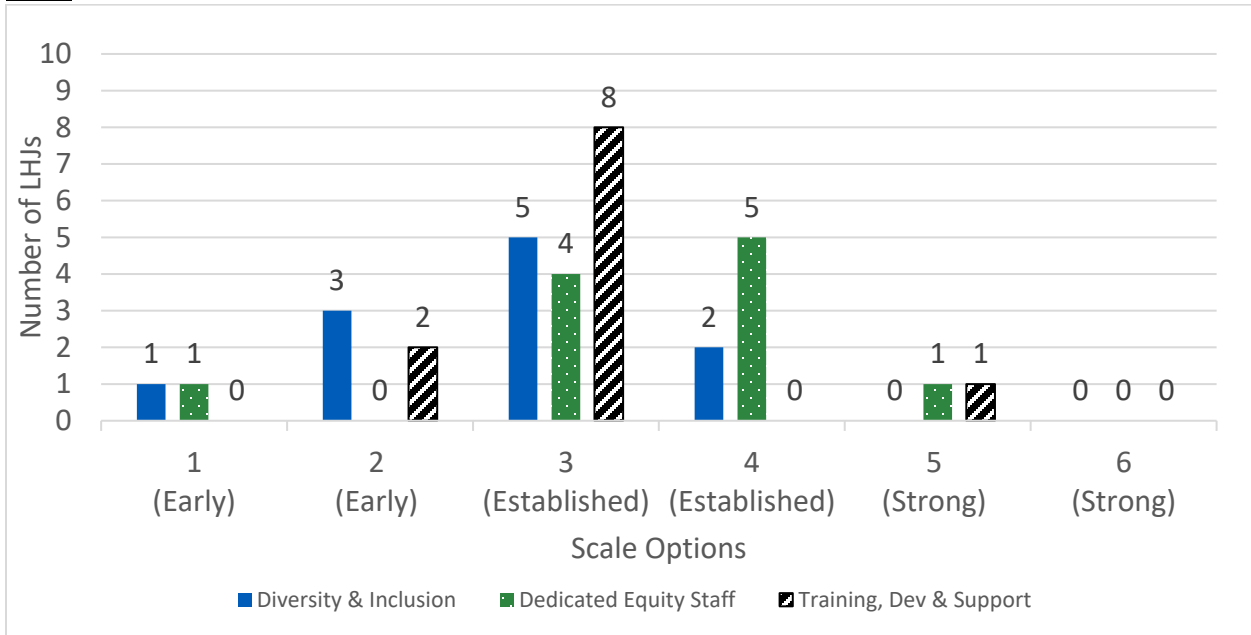


Figure 40: Rural North Domain 2 (Collaborative Partnerships) Competency Results for 2023

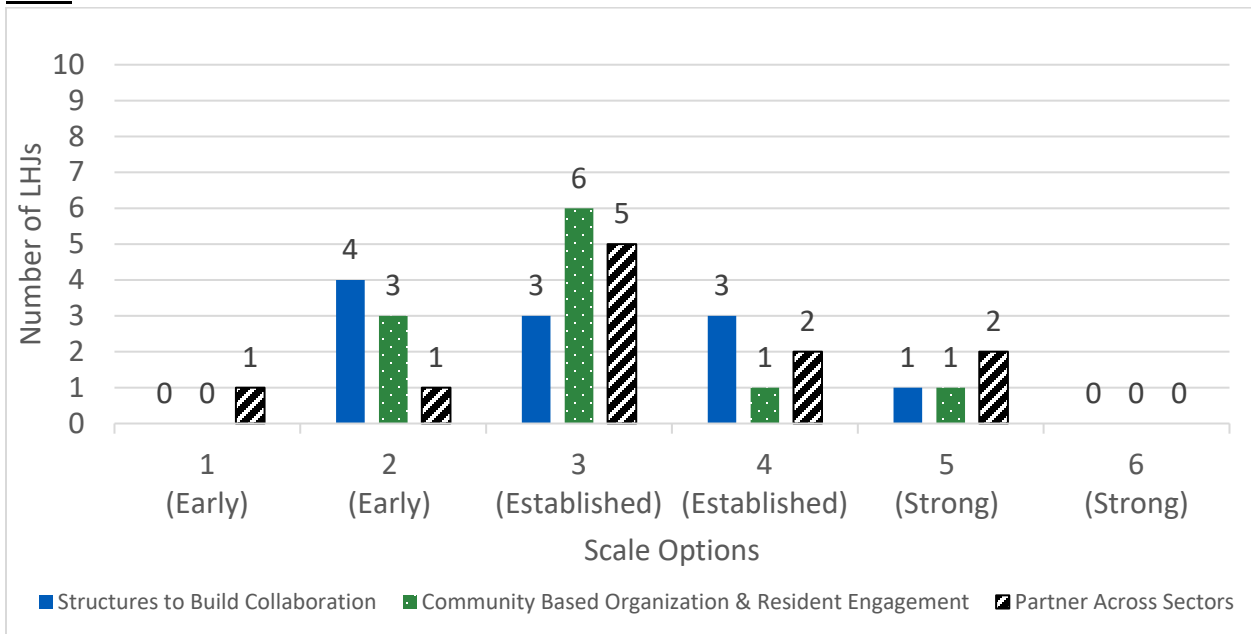


Figure 41: Rural North Domain 3 (Equity in Organizational Policies and Practices) Competency Results for 2023

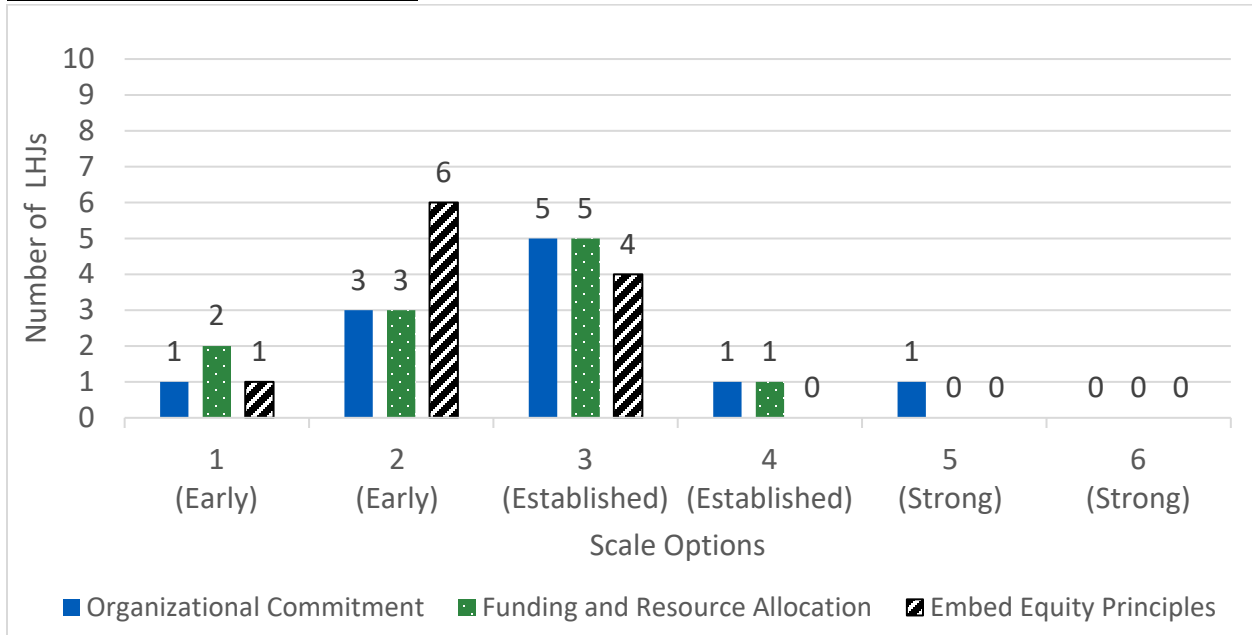
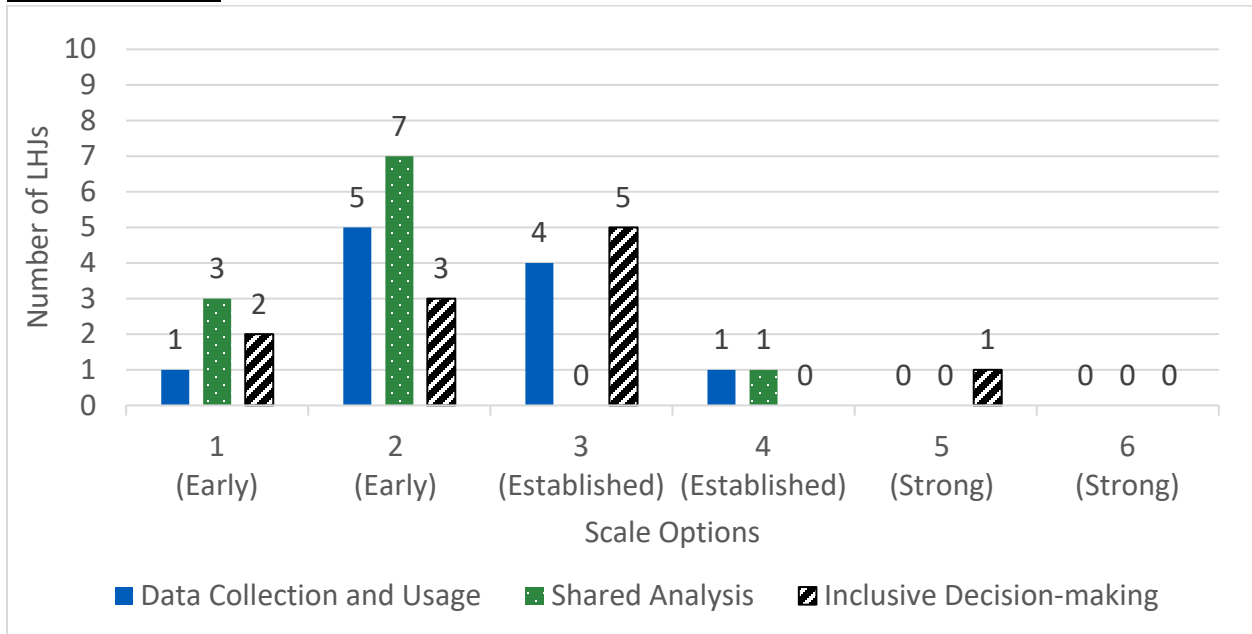


Figure 42: Rural North Domain 4 (Planning and Shared Decision-Making) Competency Results for 2023



Appendix 5: Greater Sierra Sacramento 2023 Competency Results

The bar graphs below show the number of LHJs throughout Greater Sierra Sacramento (GSS) region that selected a score from the scale (below) of 1-6 for each competency. For example, in Figure 43, 5 LHJs out of 12 selected a “2” for the competency Diversity & Inclusion.

Early		Established		Strong	
1	2	3	4	5	6
Not yet, or learning stage	Planned but not started or in initial/pilot stages of implementation	Working towards this but not fully achieved	Fully achieved	In place with evidence of its use (e.g., policies, procedures, robust evaluation plan)	Practices are sustainable and ongoing and may be shared with others as “best practices”

Figure 43: GSS Domain 1 (Workforce and Capacity) Competency Results for 2023

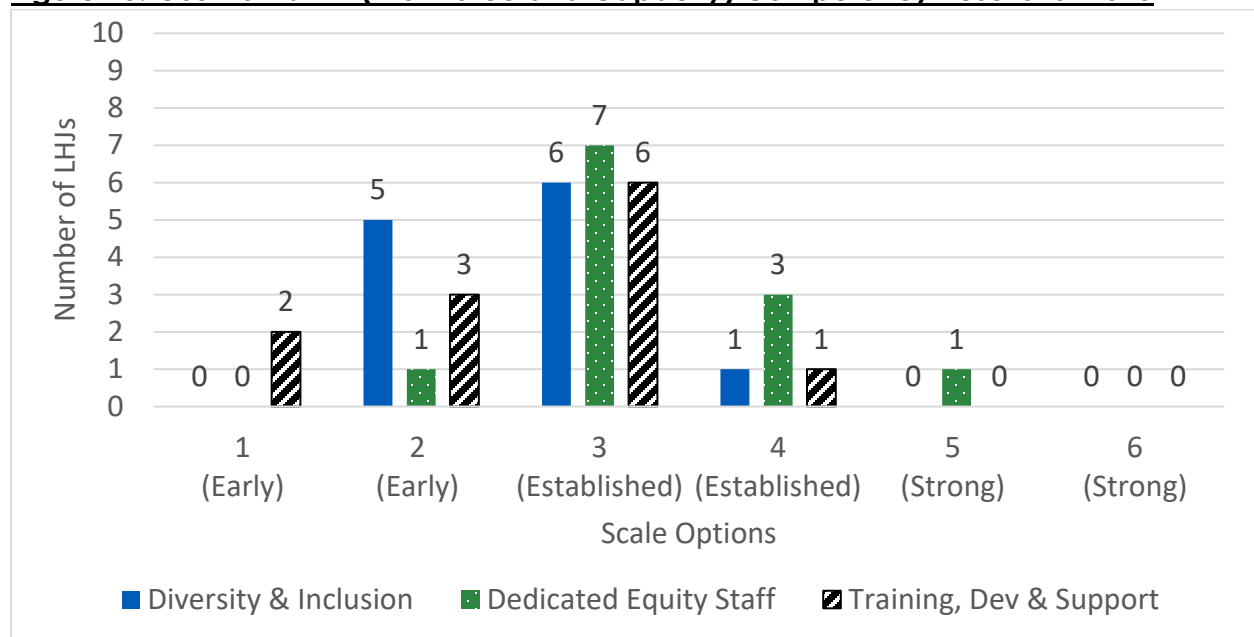


Figure 44: GSS Domain 2 (Collaborative Partnerships) Competency Results for 2023

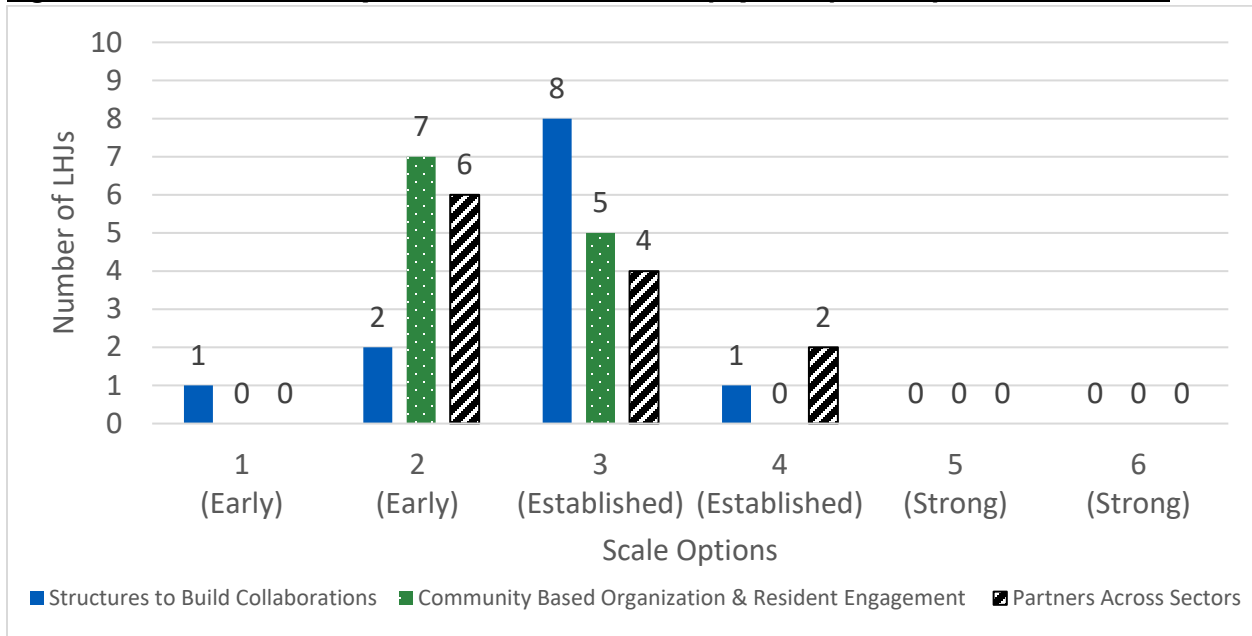


Figure 45: GSS Domain 3 (Equity in Organizational Policies and Practices) Competency Results for 2023

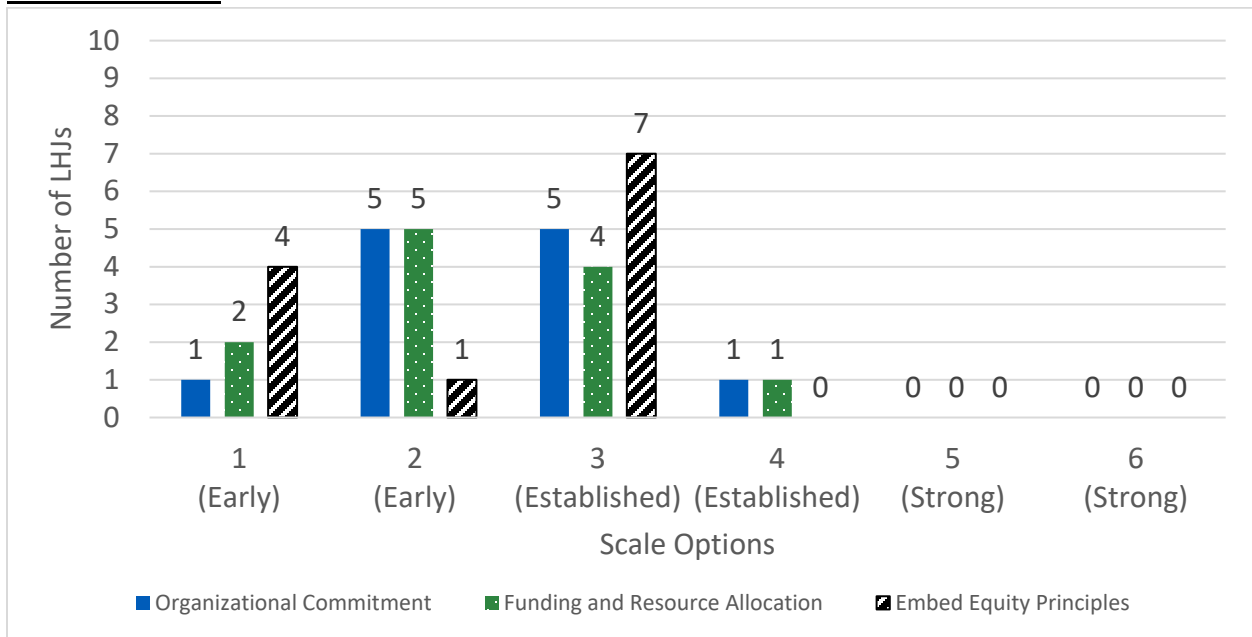
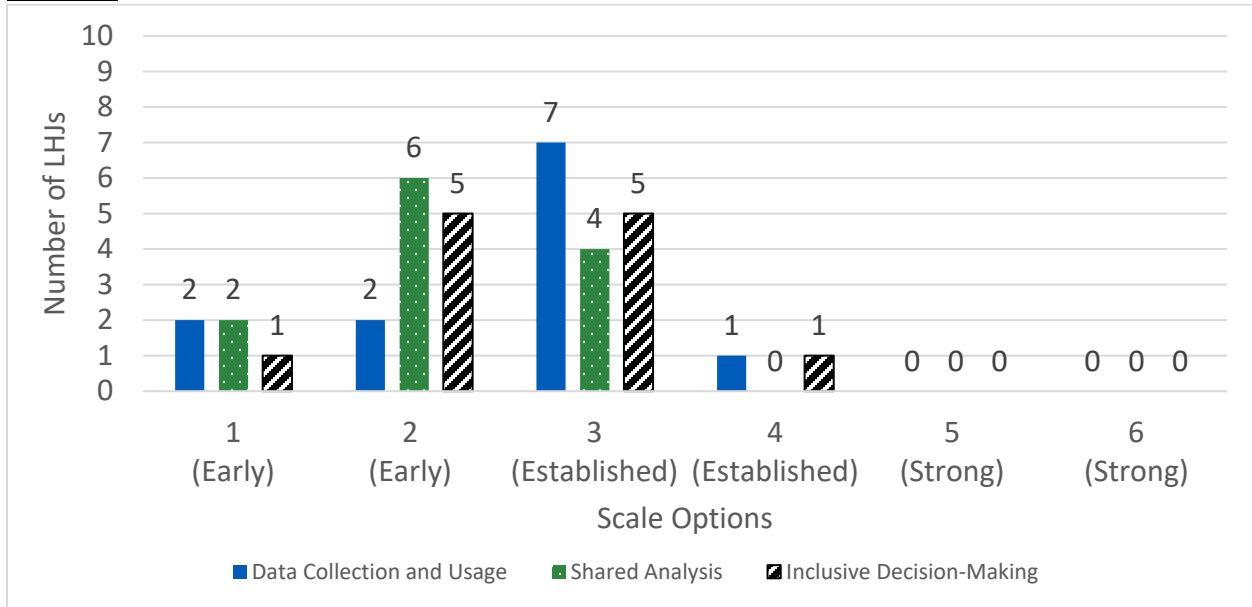


Figure 46: GSS Domain 4 (Planning and Shared Decision-Making) Competency Results for 2023



Appendix 6: Central California 2023 Competency Results

The bar graphs below show the number of LHJs throughout Central CA region that selected a score from the scale (below) of 1-6 for each competency. For example, in Figure 47, 3 LHJs out of 11 selected a “2” for the competency Diversity & Inclusion.

Early		Established		Strong	
1	2	3	4	5	6
Not yet, or learning stage	Planned but not started or in initial/pilot stages of implementation	Working towards this but not fully achieved	Fully achieved	In place with evidence of its use (e.g., policies, procedures, robust evaluation plan)	Practices are sustainable and ongoing and may be shared with others as “best practices”

Figure 47: Central CA Domain 1 (Workforce and Capacity) Competency Results for 2023

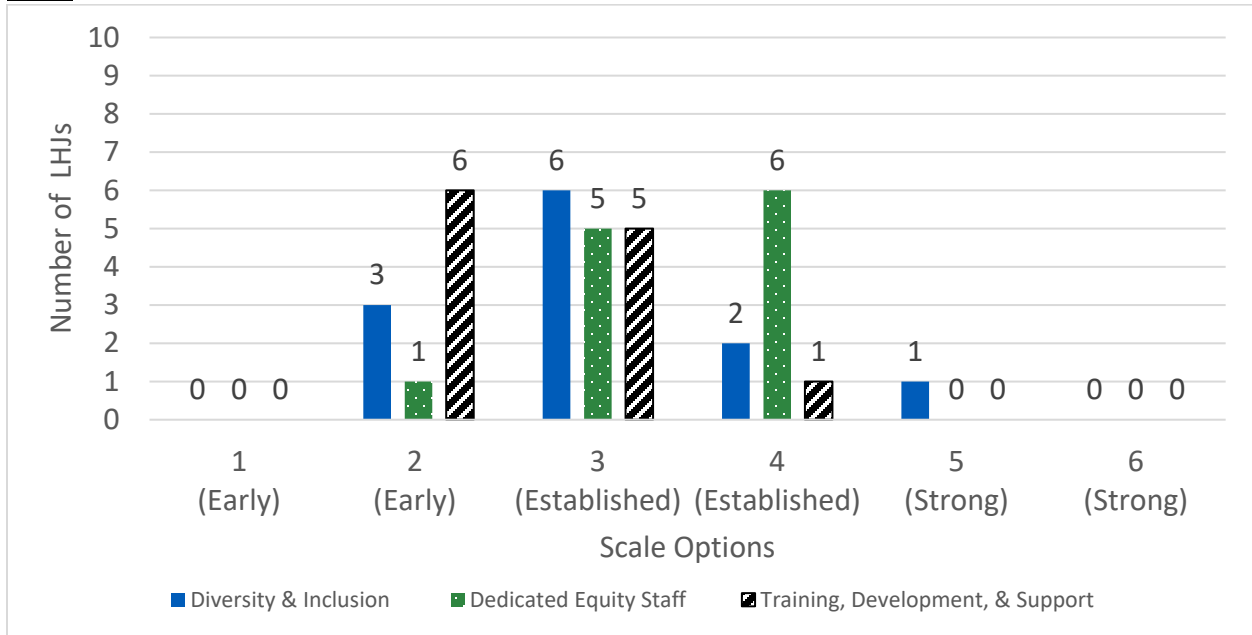


Figure 48: Central CA Domain 2 (Collaborative Partnerships) Competency Results for 2023

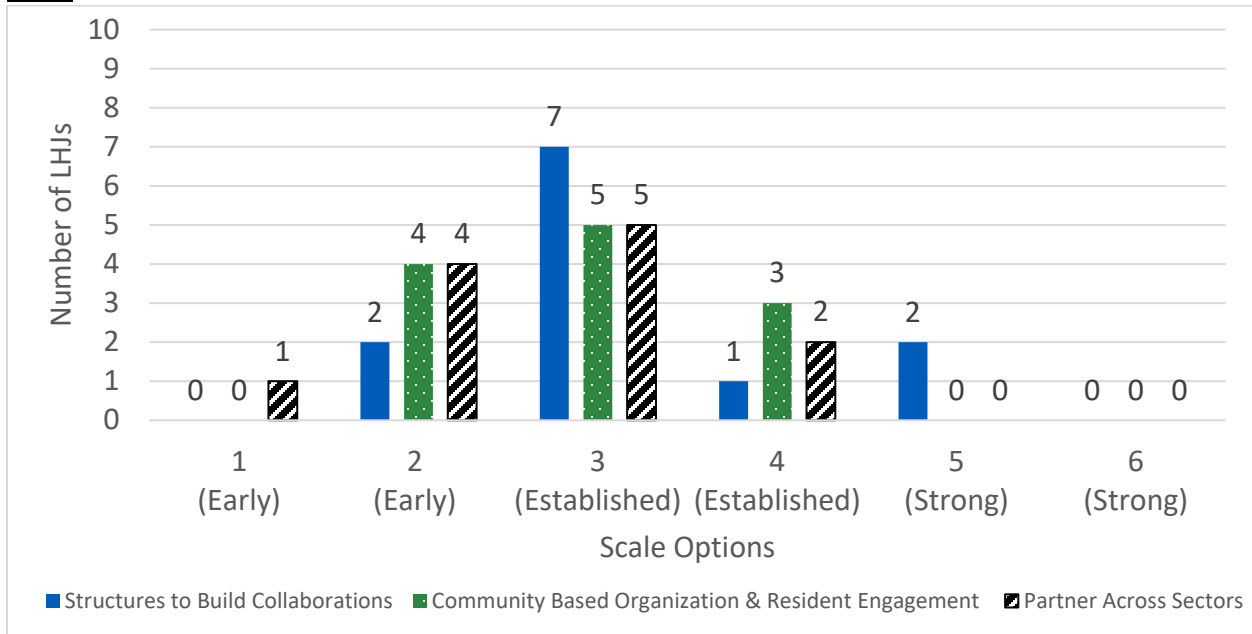


Figure 49: Central CA Domain 3 (Equity in Organizational Policies and Practices) Competency Results for 2023

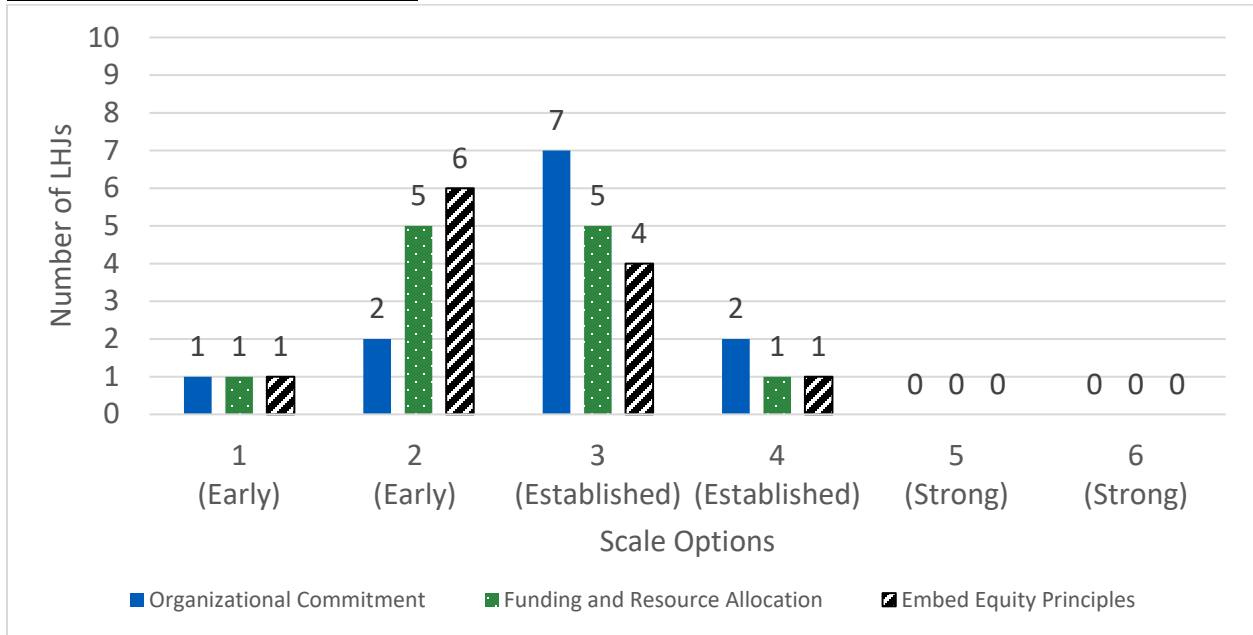
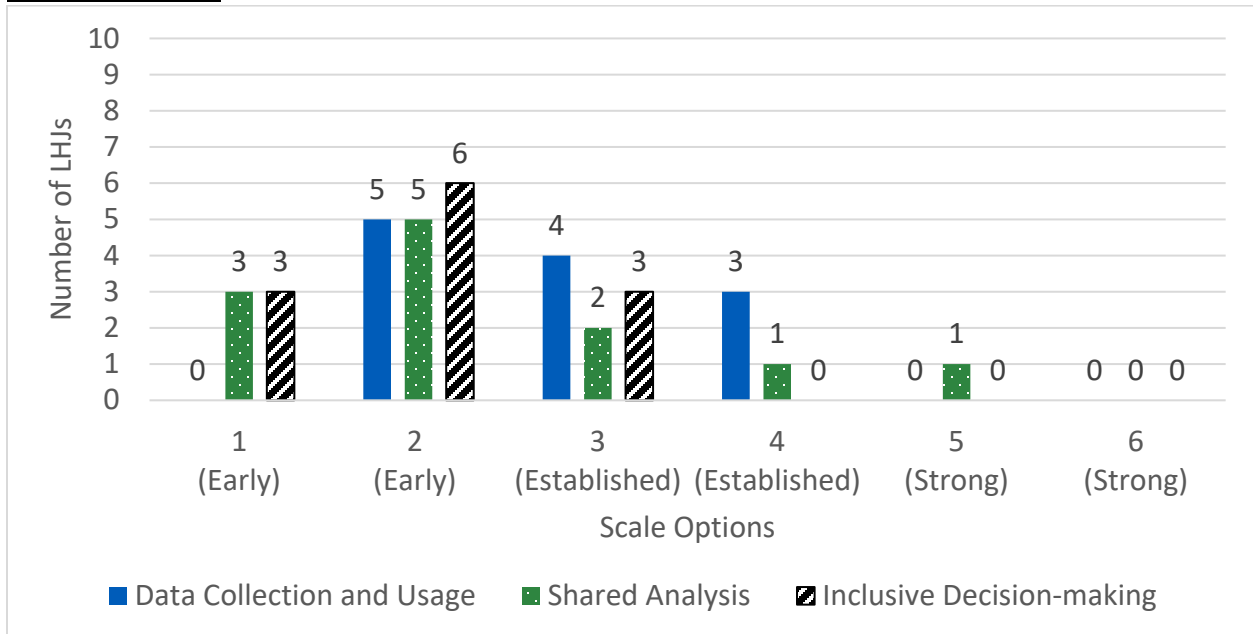


Figure 50: Central CA Domain 4 (Planning and Shared Decision-Making) Competency Results for 2023



Appendix 7: Bay Area 2023 Competency Results

The bar graphs below show the number of LHJs throughout the Bay Area region that selected a score from the scale (below) of 1-6 for each competency. For example, in Figure 51, 3 LHJs out of 11 selected a “2” for the competency Diversity & Inclusion.

Early		Established		Strong	
1	2	3	4	5	6
Not yet, or learning stage	Planned but not started or in initial/pilot stages of implementation	Working towards this but not fully achieved	Fully achieved	In place with evidence of its use (e.g., policies, procedures, robust evaluation plan)	Practices are sustainable and ongoing and may be shared with others as “best practices”

Figure 51: Bay Area Domain 1 (Workforce and Capacity) Competency Results for 2023

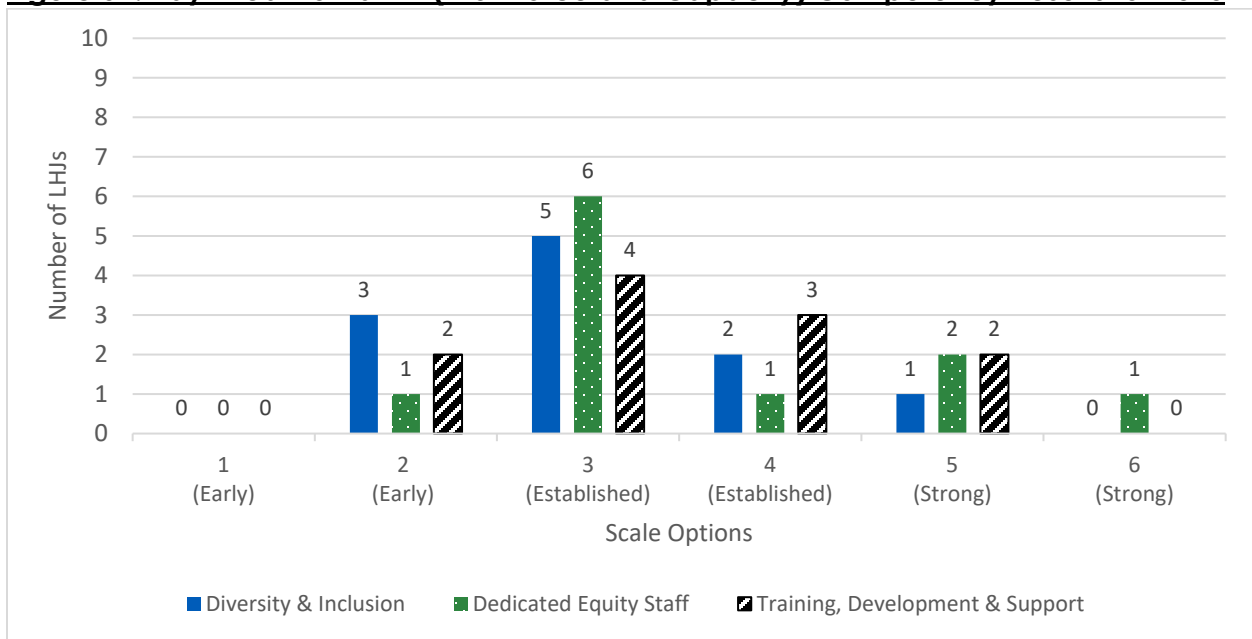


Figure 52: Bay Area Domain 2 (Collaborative Partnerships) Competency Results for 2023

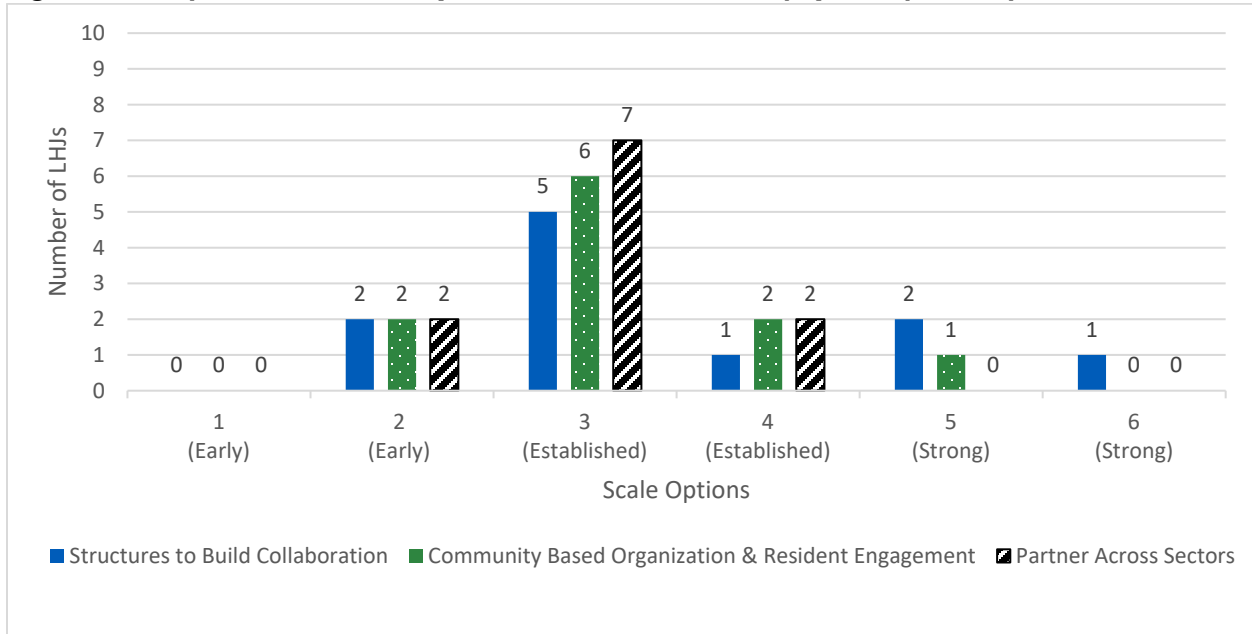


Figure 53: Bay Area Domain 3 (Equity in Organizational Policies and Practices) Competency Results for 2023

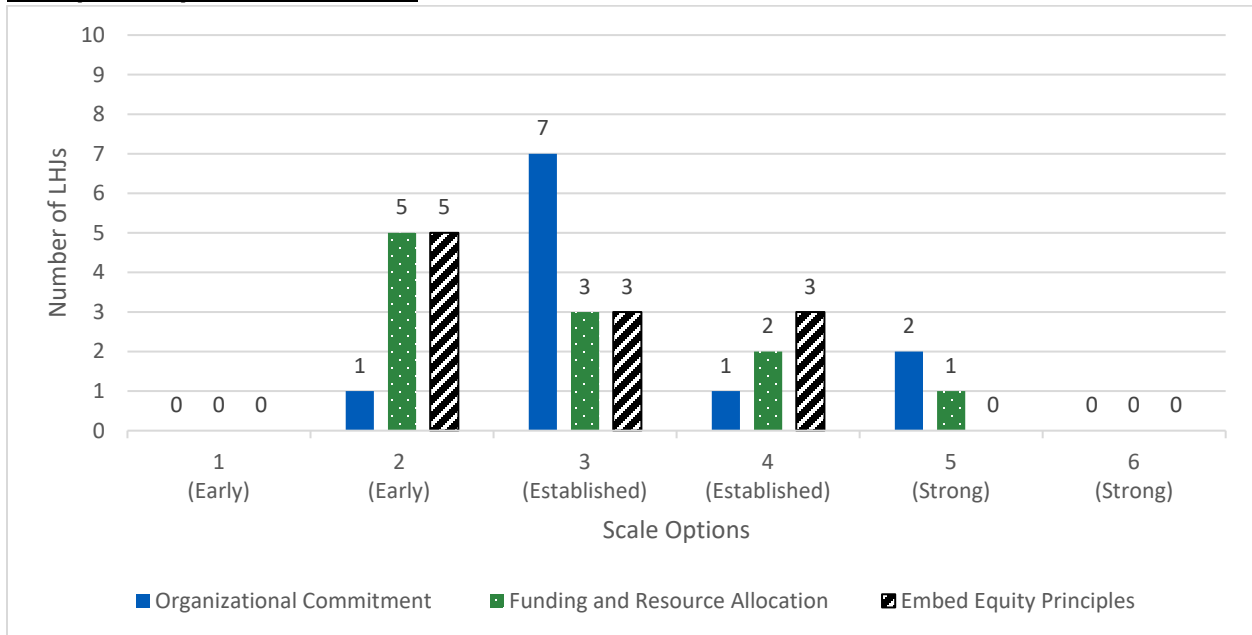
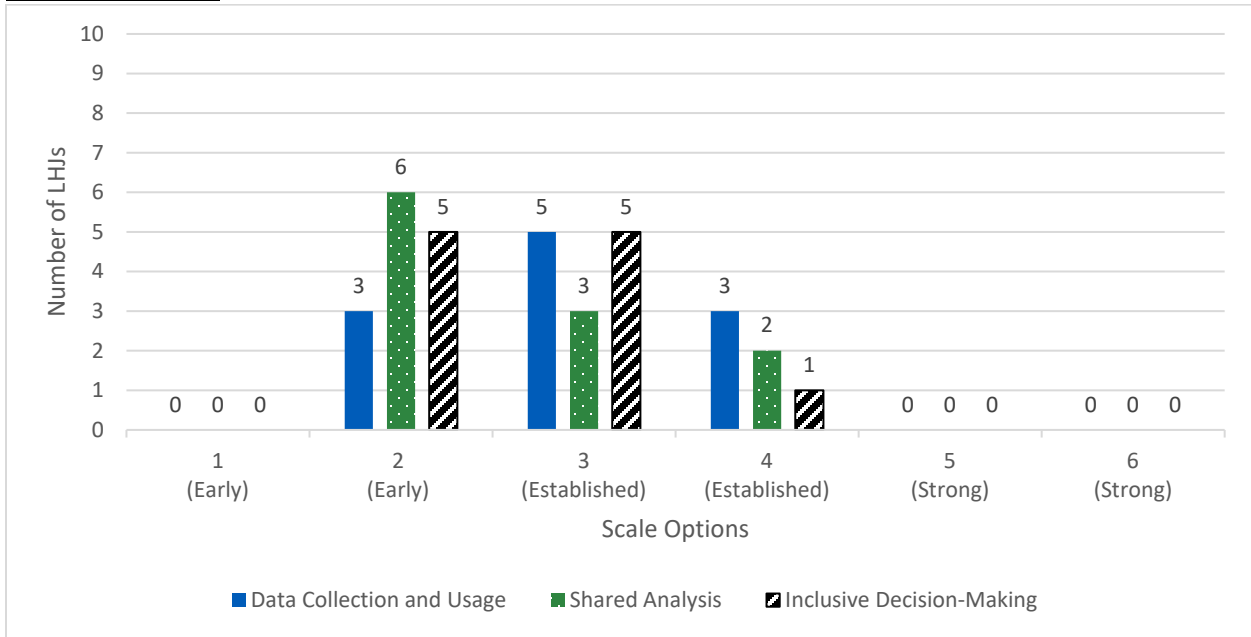


Figure 54: Bay Area Domain 4 (Planning and Shared Decision-Making) Competency Results for 2023



Appendix 8: Southern California/Los Angeles 2023 Competency Results

The bar graphs below show the number of LHJs throughout SoCal/LA region that selected a score from the scale (below) of 1-6 for each competency. For example, in Figure 55, 6 LHJs out of 13 selected a “2” for the competency Diversity & Inclusion.

Early		Established		Strong	
1	2	3	4	5	6
Not yet, or learning stage	Planned but not started or in initial/pilot stages of implementation	Working towards this but not fully achieved	Fully achieved	In place with evidence of its use (e.g., policies, procedures, robust evaluation plan)	Practices are sustainable and ongoing and may be shared with others as “best practices”

Figure 55: SoCal/LA Domain 1 (Workforce and Capacity) Competency Results for 2023

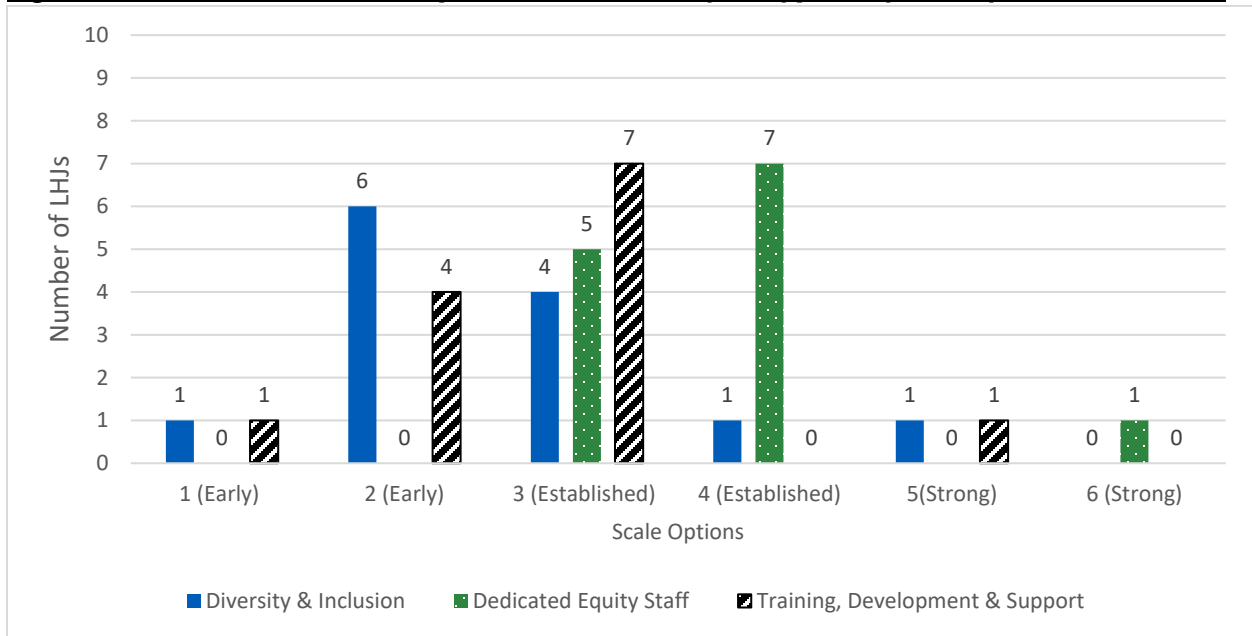


Figure 56: SoCal/LA Domain 2 (Collaborative Partnerships) Competency Results for 2023

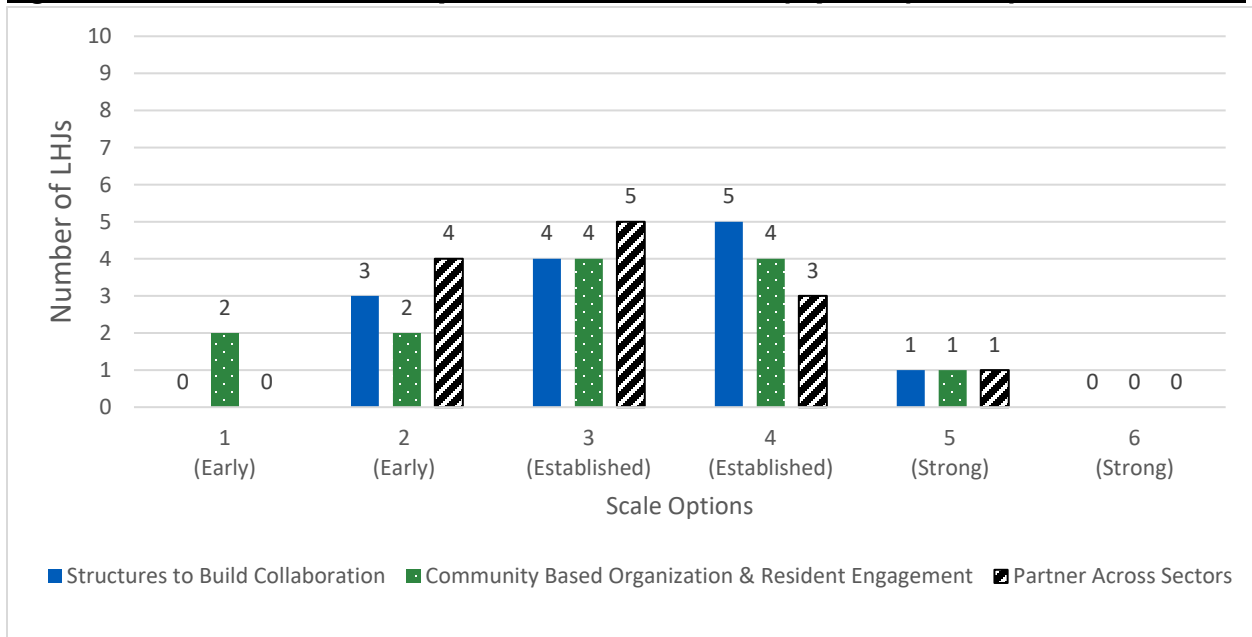


Figure 57: SoCal/LA Domain 3 (Equity in Organizational Policies and Practices) Competency Results for 2023

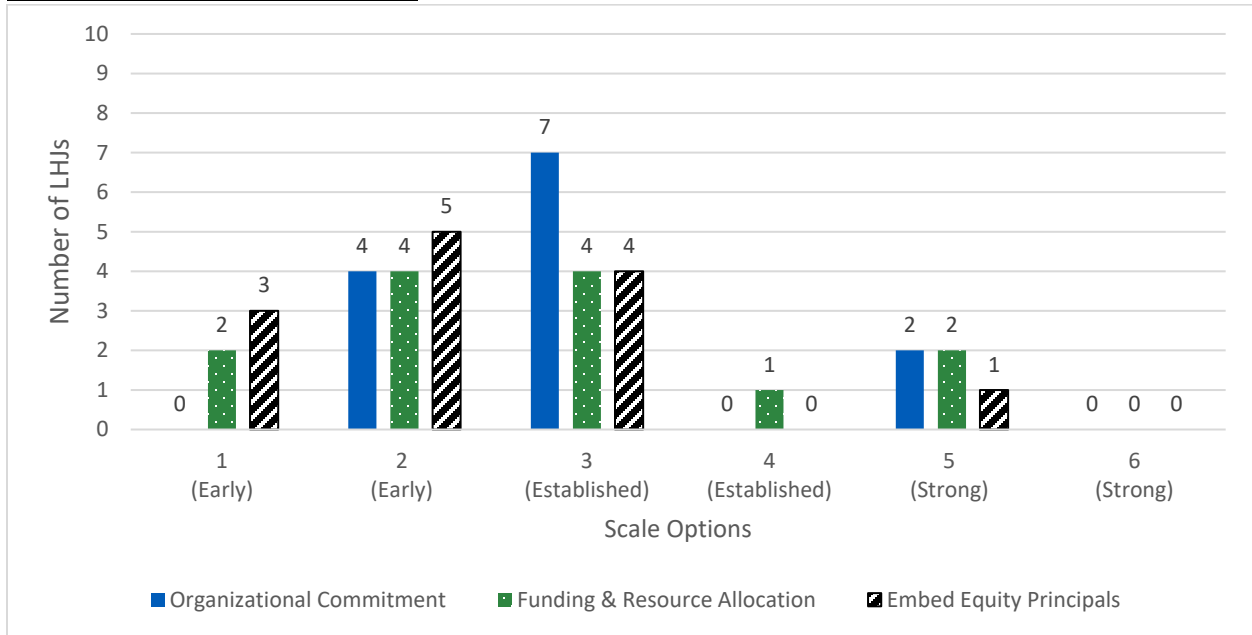


Figure 58: SoCal/LA Domain 4 (Planning and Shared Decision-Making) Competency Results for 2023

