



SB 161: Career Centered Pathways in Public Health
Senate Health Care
January 28, 2025

Chair Patterson, Vice Chair Hayden, and members of the committee:

My name is Sarah Lochner, I'm the Executive Director of the Oregon Coalition of Local Health Officials, commonly known as CLHO.

CLHO is the state association for Oregon's 33 Local Public Health departments. We advocate on their behalf, but we also provide workforce development services as well. One of our biggest undertakings in this area started in 2022 when we applied for and were awarded a \$1.5 million, three year, HRSA grant to train Community Health Workers and Community Paramedics across rural Oregon.

When we applied for the grant, we proposed serving 8 rural counties. I'm proud to report that we have trained folks from 35 of Oregon's 36 counties.

Madison is the CLHO staff that has been leading this work and so I will turn it over to her to give you a few more details.

The third component of this bill is to assist Local Public Health with its workforce challenges. Data from the Public Health Workforce Interests and Needs Survey ([PHWINS](#)) found that if the workforce exodus trend established between 2017-2021 continues, by the end of this year, 2025, state and local governmental public health will have lost 50% of its workforce nationwide. Obviously, this was accelerated by the pandemic, but the problem has not gone away.

CLHO is currently finishing up our second edition of our Oregon Local Public Health Workforce Report, slated to be published in March. The sneak preview is that Local Public Health Departments are always recruiting to fill open positions, they have difficulty filling positions in general, and a really hard time filling positions that require specific credentials like nurses, epidemiologists, environmental health specialists and others. Especially in rural communities, job seekers typically don't have the specialized training required to qualify for the job.

That's the gap CLHO is trying to fill with SB 161.

While recruiting folks from other areas can sometimes be initially successful, finding housing for newcomers is difficult no matter where you live in Oregon. Several counties have reported having folks accept a job and then back out when they couldn't find adequate housing. That's why CLHO wants to home-grow our LPH workforce by recruiting from within the local community, providing the funding to get the necessary training, and having folks commit to a duration of service, a two-year minimum or longer to correlate to the length of the training (e.g. four years of service for a four-year degree).





This would entail recruiting from local high schools, community colleges, universities, workforce boards, and among existing local public health staff that want to move up the career ladder.

We also intend to provide support stipends to trainees so that they get reimbursed for books, missed work, transportation, and whatever else they need to complete their training. For those that are struggling with their existing student loan debt, CLHO can also assist with some repayment relief. This is a retention strategy to keep folks from shopping for a higher paycheck.

Over the last 2.5 years, CLHO has developed the expertise and network of partners to do this work really well. And, because we are a small, nimble, non-profit organization, we can do this work less expensively than state or county governments, ensuring that the funding goes to developing the public health workforce and not to bureaucracy. Ultimately, we are a customer service driven organization, and as such, we have the motivation to make sure that every county sees the benefit of this investment and that it's a good use of taxpayer dollars, providing a public good.

Lastly, I have a 3 minute video to show you, specifically produced for this moment, featuring some of Oregon's public health superstars, which will wrap up our testimony.

- [video](#)

And with that, I'll just say my vision for this program is that perhaps Jessica, who you just heard from in the video, may want to continue up the ladder. CLHO would like to be there to help her further her education and her career in public health when she's ready. She is a shining example of success, and we want to replicate her achievements with SB 161.

In addition, I want to note that the legislative intent of this bill is for OHA to simply pass through the funds to the three organizations listed with limited bureaucracy. We are happy to work with them on reasonable contract agreement language and reasonable reporting requirements.

Thank you so much for your time and support.

This legislation has been endorsed by the following organizations: AFSCME, AllCare CCO, Association of Oregon Counties (AOC), Human Services Coalition of Oregon (HSCO), Oregon Public Health Association (OPHA), Washington County, and We Can Do Better.

