

The California State Auditor released the following report today:

## California Department of Public Health

*Even With a Recent Increase in Federal Funding, Its Efforts to Prevent Diabetes  
Are Focused on a Limited Number of Counties*

### BACKGROUND

One out of 12 adults in California reported being diagnosed with diabetes—a chronic medical condition that, without treatment, can lead to serious health consequences. Studies have indicated that the number of people diagnosed with diabetes in California has jumped 50 percent between 2001 and 2012. The California Department of Public Health (Public Health) is responsible for administering the State's diabetes prevention programs. Public Health's diabetes prevention efforts are funded through grants from the federal Centers for Disease Control and Prevention.

### KEY FINDINGS

During our review of Public Health's diabetes prevention programs, we noted the following:

- Although the number of Californians with diabetes has increased significantly over the past decade, funding and spending for diabetes prevention declined during fiscal year 2013–14.
  - ✓ Public Health received 22 percent less federal funding for diabetes prevention in fiscal year 2013–14 than in the prior fiscal year.
  - ✓ Two other Public Health programs that directly address diabetes also experienced declines in federal funding, which resulted in a decrease in program expenditures.
- Public Health recently received two additional federal grants that will help expand its diabetes prevention efforts in 10 counties; however, it has still not been able to target many other California counties that have a high prevalence of diagnosed diabetes.
- At a funding level of 3 cents per capita, California has the lowest per capita funding for diabetes prevention in the nation. At least three other large population states, such as New York, provide state funding for diabetes prevention that either supplements or exceeds their federal funding.
- Public Health does not have a formal process to search for grants, nor does it have a staff member who routinely and proactively searches for grants related to diabetes and, therefore, may be unaware of additional funding opportunities. In fact, we found more than 40 grants for which state agencies were eligible to apply, and Public Health could have applied for at least two of them—each worth \$500,000 per year—but did not do so.
- Although Public Health hired employees responsible for administering the diabetes portion of the Prevention First Program that met or exceeded the minimum qualifications for their positions, it did not ensure that they received diabetes-related trainings.

### KEY RECOMMENDATIONS

We made several recommendations that could increase efforts to address diabetes, such as:

- The Legislature could provide funding to establish a grants specialist position to identify and apply for federal and other grants.
- Public Health should develop a process for identifying and applying for funding opportunities and should seek funding for a grants specialist position to identify and apply for federal and other grants.
- Public Health should ensure that staff responsible for diabetes prevention has adequate knowledge and skills by tracking training for employees participating in these efforts.