



California Association of Public Health Laboratory Directors
CAPHL D

January 31, 2014

Dr. Ron Chapman, MD, MPH
Director and State Health Officer
California Department of Public Health
PO Box 997377, MS 0500
Sacramento, CA 95899-7377

*Proceeded
2/27/14*

Dear Doctor Chapman:

The membership of the California Association of Public Health Laboratory Directors (CAPHL D) wishes to report to you our continuing observation of the effect of loss of funding support for the state public health laboratories, especially the Microbial Diseases Laboratory.

Over more than a decade, the support for the Microbial Disease Laboratory has diminished to a level that threatens the control of communicable disease in California. The laboratory staffing has been reduced from a peak of around 85 state and contract staff in 2002 to now less than 25 microbiologists.

Although overall support for MDL is substandard as evidenced by the closure of the Serology and Mycology units in 2006 and 2008 respectively, the lack of support for the Mycobacteriology laboratory that has developed and provided nationally recognized epidemiologic typing methods is unprecedented. Now local public health laboratories must refer *M. tuberculosis* isolates to two laboratories: MDL for rapid antimicrobial susceptibility results and to the Michigan state public health laboratory for epidemiologic typing. This obviously puts a new burden on local public health laboratories, lengthening and complicating the information conduit for the critical information for controlling tuberculosis.

Further the support for enteric disease microbiologic expertise is egregious. At a time when foodborne illness outbreaks are no less frequent and often in greater magnitude than the past decade, the enteric laboratory supervisor position remains unfilled and those supervisory duties are added to already considerable duties of Dr. Will Probert's position.

The lack of state support is also evident in the activities of the PulseNet group that currently has 5 scientists. However, 4 of the 5 scientists are supported by federal funds, namely the Epidemiology and Laboratory Capacity Grant. In contrast, the Colorado Public Health Laboratory that has distinguished itself with rapid analysis of multi-state outbreaks, serves a population of 4.6 million with two scientists performing PulseNet activity, whereas California with 5 scientists serves a population of 37 million—eight times larger. We again fail to see proportionate support.

We are also concerned with the failure to retain qualified, experience scientists in that no young scientists hired since 2005 have continued service at MDL. The public health laboratory community relies on the expertise of senior scientists at MDL and is concerned that the reputation of MDL is at stake if expertise cannot be retained. This worrisome development indicates that collective expertise will not be amassed in the coming years, but rather further deterioration can be expected.

Finally the ability to recruit qualified scientists to open positions at MDL due to the low salaries is an additional problem that needs to be addressed. At a time when new technologies such as next generation DNA sequencing promises to revolutionize public health laboratory data collection and analysis, it appears that MDL cannot attract an individual with the requisite education and expertise to begin work on the new sequencing technology.

We recommend that an analysis of salaries and a plan to correct this situation be undertaken immediately. CAPHLD can provide salary information for local public health laboratory scientists if this can be of value in correcting the unbalanced remuneration for state laboratory scientists.

Sincerely yours,

James L. Beebe, PhD, D(ABMM)
President, California Association of Public Health Laboratory Directors

Director, Public Health Laboratory
San Luis Obispo County Health Agency
2191 Johnson Avenue
San Luis Obispo, CA 93401
805-781-5512 fax 805-781-1023
jbeebe@co.slo.ca.us

CC J Watt, P Kimsey, J Rigel CHEAC, R Lawson CCLHO