



Meeting Minutes

Friday, January 14, 2000

9:00 AM - 3:00 PM

Almas Temple, Crowne Plaza Hotel

Washington, DC

Members Present: J. Frederick Agel, Susan Allan, Ronald Brown, Diane Downing, C. William Keck (Chair), Charles Mahan, Anthony Moulton, Neil Sampson, Randy Schwartz, Hugh Tilson, Martin Wasserman

Other Participants Present: Elaine Auld, Stacy Baker, Joan Cioffi (via teleconference), Mary Davis, Ron Merrill, Tom Milne, Henry Montes, Kate Paulson, Ha Pham, Ted Pratt, Elizabeth Weist

Staff Present: Ron Bialek, Dianna Conrad

I. Opening Business

Dr. C. William Keck, Chair, opened the meeting, welcomed all participants, and led introductions. Elizabeth Weist from the Association of Schools of Public Health (ASPH) requested changes to the minutes from the previous Council meeting on July 14, 1999. These changes were pertaining to the release of the "Demonstrating Academic Excellence" paper in various journals. The minutes, as amended, were unanimously approved.

II. Implementation of Centers for Disease Control and Prevention (CDC) Workforce Task Force Recommendations (Objectives 2, 4, 7, 8)

Dr. Anthony Moulton and Joan Cioffi from CDC gave a brief summary of CDC's efforts to develop a coordinated plan for training and continuing education of the public health workforce. They also thanked the Council for submitting comments on the draft strategic plan. Dr. Moulton explained that the next phase is working on developing an implementation plan for the strategic plan by identifying what is currently under way and determining what are the highest priority needs.

Dr. Moulton identified three potential areas for the Council's future contributions to this initiative:

- Tie in the Council's competencies project, as a competent public health workforce is the basis of CDC's strategic plan and an important part of what CDC is/will be doing. Dr. Moulton expressed that CDC can benefit from the Council's competencies effort. Overall, Council members thought it was important to determine where the different disciplines stand regarding competencies and to identify what the barriers are to cross-discipline, core

competencies. Council members also thought it was important to include an incentives piece to any competencies effort – to have supports in place. In addition, Council members suggested that CDC use the competencies framework and the Essential Public Health Services to guide funding decisions. Dr. Keck concluded that the Council is interested in the continual involvement of CDC in the Council’s competencies work.

- Determine a role for the Council in the credentialing of public health professionals. Council members stressed that there is little data available to determine if competencies are used, how they are used, and who is being trained. Dr. Moulton suggested the possibility of a survey to determine where the gaps are in training around core competencies. Dr. Keck concluded the discussion by suggesting the Council put together a list of approaches the Council can take to assist CDC with this aspect of the workforce training effort.
- The Council could serve as a sounding board when CDC is ready to move forward with the implementation plan. This was thought to be a beneficial idea to both the Council and CDC. Members expressed interest in continuing dialogue with CDC regarding the role the Council can play, once the implementation plan is ready.

Dr. Keck thanked Dr. Moulton and Ms. Cioffi for sharing CDC’s work and interest in continuing to work with the Council.

III. Competencies Workplan (Objectives 2, 4, 7, 8)

Ron Bialek presented the proposed workplan for the competencies project. Council members made the following recommendations:

- The focus should be on developing a core set of minimum competencies for all public health professionals.
- While some Council members thought the plan should include a more scientific validation process, the council concluded that the proposed steps – to gain input through focus groups at national meetings and collecting comments via e-mail and fax - are sufficient first steps for this effort.
- The long-range plan should include a rigorous evaluation plan to determine who is using the competencies and if they are adding value to the public health profession. Council members agreed that this is a logical next step once the list of competencies is finalized.

IV. Review and Discussion of State Association of County Health Officials (SACHO) Demonstration Project Surveys – (Objective 7)

Dr. Keck updated Council members on the SACHO project, specifically the distribution of the health department and academic institution surveys. Council members suggested consideration of the following:

- If possible, the survey should be shortened to increase the response rate.
- Questions should be added about training programs or continuing education for health department employees and the role academicians play in these programs.
- Some questions should address competencies and the Essential Public Health Services.
- The survey should determine the number of employees in each health department, the annual overall budget, and the annual training budget for health departments.

- The academic survey should ask what incentives academic institutions offer to their staff for participation in academic/practice linkages.

V. Developing a Public Health Practice Research Agenda (Objectives 1, 5, 6)

Dr. Hugh Tilson gave a brief update on the research agenda.

- He was invited to present the research agenda concept and go through the matrix at CDC on January 18, 2000.
- Mr. Bialek suggested using the Leading Health Indicators for the proposed pilot project. Council members agreed that this made sense.
- Dr. Tilson gave an overview of the successful session held during the American Public Health Association (APHA) annual meeting.
- The APHA session, which focused on the Healthy People 2010 Objective, “Increase the proportion of state and local public health agencies that meet national performance standards for essential public health services,” generated the following questions:
 1. Monitoring performance – What is the unit of analysis?
 2. Inform and educate – Who needs to know? How do you educate?
 3. Mobilize – Who should care? How do you create value?
 4. Developing policy – Which standards are effective?
- The APHA session generated the following take-home messages:
 - The research agenda will be challenging, but doable.
 - There is interest in and need for a national public health practice research agenda.
- The next steps for the research agenda:
 - Continue to fill in the cells of the matrix.
 - Disseminate information about the research agenda and educate others on its utility.
 - Continue to pursue funding for the pilot project.
 - Assemble partners to contribute to the project.

VI. Center for Community Responsive Care (CCRC) (Objective 8)

Dr. Keck brought forth a request from the CCRC for the Council to be a part of the CCRC board of directors. Council members agreed that this project is a good idea, but stressed that individual organizations of the Council, not the Council itself, can choose to serve on the board. This request was declined, but the Council encourages CCRC to approach the individual organizations of the Council.

VII. Council Objectives for the Year 2000

Dr. Keck directed Council members’ attention to a draft list of measurable objectives for the Council for the year 2000. Several suggestions were made in order to advance the objectives.

- The objective for the competencies project will eliminate reference to master’s level public health professionals and re-word the objective to include all public health professionals.
- Dr. Tilson suggested the Council specifically state as an objective, the continued recognition of “best practice” linkage activities through *The Link* and the annual Linkage Awards. Council members agreed that this addition makes sense.
- A motion was made by Mr. Frederick Agel to add the National Association of Local Boards of Health to Council objective 7, strategy 4. The motion was seconded by Mr. Neil Sampson and unanimously approved.
- The objective related to the ASPH Practice Coordinator’s Council will be revised to reflect collaborative work on the Award for Student Excellence in Public Health Practice. Council members agreed to also include a statement on working with ASPH’s Council on a faculty award. In addition, the Council agreed to invite the new chair of the Practice Coordinator’s Council to a future meeting to discuss ways the Council can advance the Practice Coordinator’s agenda.
- The category title “others” will be changed to “core functions.”
- Mr. Sampson suggested adding an objective conveying the value the Council can add to issues on workforce development and credentialing.

VIII. HRSA Public Health Regional Training Centers (PHRTCs) (Objectives 4, 7, 8)

Mr. Sampson gave an overview of HRSA’s PHRTCs. He would like to see a link between the PHRTCs and the Council. Mr. Sampson pointed out that there are advisory councils for almost all health professions training, but not for public health. Council members agreed that it makes sense to discuss the potential role of the Council as a public health training advisory body. Dr. Keck suggested creating a working group to further explore this issue. Volunteers for this working group include – Mr. Sampson, Dr. Charles Mahan, Ms. Weist, and Mr. Ted Pratt.

Council members suggested that a separate working group be formed to discuss the future role of the Council in public health education and training. Volunteers for this working group include - Dr. Tilson, Mr. Mike Gemmell (via Liz Weist), Mr. Randy Schwartz and a representative from the Association of Teachers of Preventive Medicine.

Dr. Doug Lloyd stressed the importance of discussing the PHRTCs with the “Friends of HRSA” group to let them know about this activity. Because Council member organizations are a part of this group, Dr. Lloyd suggested Council members approach their respective organizations and advocate for the PHRTCs.

IX. Healthy People 2010 Update (Objectives 5, 7)

Dr. Randy Wykoff from the Office of Disease Prevention and Health Promotion talked about the status of Healthy People 2010, the upcoming launch conference, and opening dialogue about the potential role of the Council in implementing Healthy People 2010. Dr. Wykoff stressed that the biggest challenge will be to carry the momentum of the launch conference to the next step – implementation. Dr. Wykoff expressed a strong interest in discussing the next steps with the Council at a future meeting. Dr. Keck agreed that this should be a future agenda item for the Council. Dr. Wykoff also informed Council members that the Healthy People 2010 document

(Conference edition) will be available on CD ROM and on the Internet at <http://www.health.gov/healthypeople/Document/default.htm>.

X. Credentialing of Public Health Workers (Objectives 4, 7)

Dr. Mahan and Ms. Weist talked about the new credentialing initiative being spearheaded by ASPH and APHA. Council members expressed the following:

- The Office of Management and Budget needs to be convinced that training of public health professionals is important. Right now, they do not support funding for public health training.
- Other organizations need to be brought into this activity early on for increased buy-in later.
- This effort can be informed by the National Council on Teacher Certification and its efforts to ensure status for credentialed employees and how to increase funding for training and credentialing. Council members agreed that it would be beneficial to look into this.
- The nursing profession has 23 groups who credential nurses. These groups are beginning to look at what benefits nurses receive as a result of being credentialed. They are trying to determine why credentialing has failed their profession. Much can be learned from the nursing professions' experiences.
- The main barrier to credentialing will be the funders to back it. This is an issue that should be addressed by the ASPH/APHA committee.

XII. Other Business

- Dr. Keck reminded Council members to make travel arrangements as early as possible, as it cuts costs and workload for Council staff.
- Dr. Keck discussed a request from Lloyd Novick that the Council share *The Link* mailing list with the *Journal of Public Health Management and Practice*. Council members agreed that since *The Link* subscribers were never given the option to be put on other mailing lists, we should not share the list. It was decided that the Council would give Dr. Novick space in *The Link* to advertise the Journal and offer a discount to *The Link* subscribers.
- Dr. Keck announced that the April 12, 2000 meeting date was cancelled and an e-mail would be sent around polling Council members for a convenient May 2000 meeting date.
- Due to time constraints, Ms. Dianna Conrad agreed to send an e-mail update about *The Link*, dates for upcoming meetings, and abstract submissions.

The meeting was adjourned at 3:00 PM.

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