## The Council on Linkages Between Academia and Public Health Practice Virtual Meeting

**Date:** July 17, 2017

### Meeting Minutes – Draft

**Members Present:** C. William Keck (Chair), Philip Amuso, Wendy Braund, Christina Dokter, Michael Fagen, Gary Gilmore, Lynn Goldman, Penrose Jackson, Lisa Lang, Amy Lee, Patrick Lenihan, Susan Little, Beth Ransopher, Susan Swider

**Other Participants Present:** Meredith Addison, Yesenia Alvarez, Magali Angeloni, Zona Ascensio, John Auerbach, Mike Barry, Daphne Bascom, James Boex, Jeanne Bowman, Becky Buhler, Stephanie Bunner, Lisa Campbell, Vera Cardinale, Samantha Cinnick, Kimberly Coleman, Soloé Dennis, Tara Echols, Bobbie Erlewein, Jen Freiheit, Kate Glynn, Nadim Haddad, Heather-Lyn Haley, Elizabeth Harper, Deborah Heim, Tanya Honderick, Emmanuel Jadhav, Catherine Johnson, Rita Kelliher, Joan Kub, Vanessa Lamers, Jessie Legros, Allison Lewis, Veronika Lozano, Awele Maduka-Ezeh, Elizabeth Magnuson, Bryn Manzella, Rachel Melody, Dave Palm, Catherine Palmer, Eva Perlman, Janet Place, Nanci Reiland, Julia Resnick, Russ Rubin, Jennifer Schuette, Lisa Sedlar, Lenee Simon, Michelle Tissue, Laura Valentino, Kristen Varol, Sandra Whitehead, Betsy Wood

**Staff Present:** Ron Bialek, Kathleen Amos, Janelle Nichols

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<th>Agenda Item</th>
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<td><strong>Welcome and Overview of Agenda</strong></td>
<td>The meeting began with a welcome by Council Chair C. William Keck, MD, MPH. Dr. Keck reviewed the agenda for the meeting.</td>
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<td><strong>Approval of Minutes from April 11, 2017 Meeting</strong></td>
<td>Dr. Keck asked for any changes to the minutes of the April 11, 2017 Council meeting. Gary Gilmore, MPH, PhD, MCHES, moved to approve the minutes as written. Amy Lee, MD, MPH, MBA, seconded the motion. No additions or corrections.</td>
<td>Minutes of the April 11, 2017 Council meeting were approved as written.</td>
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<td><strong>CDC Update</strong></td>
<td>Guest speakers Bobbie Erlewein, MPH, Chief, Health Department and Systems Development Branch, Office for State, Tribal, Local and Territorial Support (OSTLTS) and Kate Glynn, DVM, MPVM, Associate Director for Science, Division of Scientific Education and Professional Development, Center for Surveillance, Epidemiology, and Laboratory Services (CSELS), Centers for Disease Control and Prevention (CDC), provided an update on CDC’s priorities related to Council activities and workforce development. The Council is supported by funding from CDC. Dr. Keck invited questions for Ms. Erlewein and Dr. Glynn.</td>
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<td><strong>Trust for America’s Health: Support for the Governmental</strong></td>
<td>John Auerbach, MBA, President and CEO, Trust for America’s Health, discussed the current public health environment and support for the governmental public health workforce. Points shared included that the</td>
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| Public Health Workforce | Workforce is shrinking, the workforce is aging, the work of public health is complex and changing, the composition of the workforce is changing, the future is uncertain, funding does not reflect changes in the causes of death, and action is needed to fight for the workforce.

Demonstrating the value of public health is one focus included within the Council’s Strategic Directions. In this time of uncertainty regarding support and funding for public health, it is important to consider potential challenges and implications for the governmental public health workforce, as well as new strategies to enhance public health and better communicate the value that public health offers.

Dr. Keck invited discussion and questions for Mr. Auerbach. |
| American College of Preventive Medicine: Consensus Statement – Preventive Medicine Physician Licensure | Mike Barry, CAE, Executive Director, American College of Preventive Medicine (ACPM), discussed a draft consensus statement focused on preventive medicine physician licensure. As follow-up to the discussion around licensure for preventive medicine physicians during the April 2017 Council meeting, ACPM drafted a consensus statement for the Council’s consideration. The Council was invited to discuss the draft consensus statement and provide feedback.

Dr. Keck invited questions for Mr. Barry.

Dr. Gilmore offered a motion of support for the consensus statement. Dr. Lee seconded the motion. A vote was called on adoption of the consensus statement. |
| Association of Public Health Laboratories: Public Health Laboratory Competencies | Cathy Johnson, MA, MT (ASCP), Director of Education and Training, Association of Public Health Laboratories (APHL), shared work related to the Competency Guidelines for Public Health Laboratory Professionals developed by CDC and APHL. Having published these competencies in 2015, APHL is now working to integrate the competencies into laboratory workforce practices. A new Laboratory Competency Implementation Toolbox was recently released to support these efforts and can be accessed from the APHL website.

This effort has made use of the Core Competencies for Public Health Professionals (Core Competencies) and offers an example of how the activities of Council member organizations may align with the Council’s Strategic Directions, in this case with Objective C within the Strategic Directions, which relates to supporting the development of a diverse, highly skilled, and motivated public health workforce with the competence and tools to succeed. |
### Quad Council Coalition of Public Health Nursing Organizations: Quad Council Public Health Nursing Core Competencies

Susan Little, DNP, RN, PHNA-BC, CPHQ, Council representative for the Quad Council Coalition of Public Health Nursing Organizations, and Lisa Campbell, DNP, RN, PHNA-BC, Associate Professor, Texas Tech Health Sciences University School of Nursing, provided an update on the Quad Council Public Health Nursing Core Competencies. These competencies are based on the Core Competencies and are currently being updated to align with the 2014 version of the Core Competencies. As with the presentation from APHL, this work offers another example of alignment with Objective C within the Council’s Strategic Directions.

Dr. Keck invited questions for Dr. Little and Dr. Campbell.

### Core Competencies for Public Health Professionals

- **New Tool:** Determining Essential Core Competencies for Public Health Jobs
- **Demonstrating Impact**

Core Competencies Workgroup Co-Chairs Dr. Lee and Janet Place, MPH, provided an update on work related to the Core Competencies.

Dr. Lee shared information about the newest Core Competencies tool, *Determining Essential Core Competencies for Public Health Jobs: A Prioritization Process*, developed to help with identifying Core Competencies relevant to jobs within public health. The Core Competencies are used in workforce development activities across the country, including the development of competency-based job descriptions, and are widely applicable to the variety of jobs found within public health. For any specific job, the critical competencies within the Core Competencies will vary depending on the responsibilities and activities of individuals in that position. When developing a job description, it is important to determine which competencies are most essential for that position. This new Core Competencies tool describes a process for prioritizing competencies for job descriptions using a modified version of the Core Competencies. Public health organizations can use this process in a workshop setting to help engage staff members to identify and prioritize the Core Competencies that they feel are most important for their roles. The tool is available through the Council website, along with accompanying materials to support use of the tool.

This tool and an example of how Denver Public Health implemented and built on this process to support competency development within their organization were featured in a recent webinar, *Determining Essential Core Competencies for Job Positions*, which was archived and is also available through the Council website, as well as in a workshop at the 2017 Public Health Improvement Training in June. In addition, a presentation based on
the tool has been accepted for the American Public Health Association (APHA) Annual Meeting this fall. As determined at the April 2017 Council meeting, the Core Competencies will not be revised this year. The Core Competencies Workgroup, which now has nearly 100 members, will continue to work on tools and resources to support use of the Core Competencies, including building collections of job descriptions and workforce development plans that incorporate the Core Competencies. As always, examples that can be added to these collections, or other examples of how you are using the Core Competencies, are welcome.

As follow-up to the discussion during the April 2017 Council meeting about exploring Council involvement in recognizing competency sets that are based on the Core Competencies, the Core Competencies Workgroup is planning to begin discussing this at its next meeting on July 24, 2017.

Ms. Place shared an update on use and impact of the Core Competencies. Since the current version of the Core Competencies was released in June 2014, Council staff have tracked online visits to the Core Competencies, showing that the Core Competencies have been accessed nearly 137,000 times, and resources and tools related to the Core Competencies have been accessed an additional 261,300 times. Online access of the Core Competencies and related resources and tools has increased from around 16,000 views in FY11 to more than 134,500 views in FY17. Four blog posts related to the Core Competencies were published on the PHF Pulse blog in FY17, which were viewed nearly 1,300 times, and the recent webinar on Determining Essential Core Competencies for Job Positions was attended by nearly 200 participants. Technical assistance related to the Core Competencies is provided on a primarily distance basis, and in FY17, Council staff responded to more than 50 requests, serving nearly 40 organizations in 23 states, Guam, and Nepal. As Council leadership and staff work to better highlight the impact of Council activities such as the Core Competencies, input is welcome on whether these types of data or examples are helpful and what else would be useful to help illustrate the reach and use of these products.

Examples of job descriptions and workforce development plans that incorporate the Core Competencies or other examples of Core Competencies use can be sent to Janelle Nichols at jnichols@phf.org.

The Core Competencies Workgroup will explore Council involvement in recognizing competency sets based on the Core Competencies and report back to the Council.

Suggestions for how to help illustrate the reach and use of products related to the Core Competencies may be shared with Kathleen Amos at kamos@phf.org.

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<td>➢ Staged Model of AHD Development</td>
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Dr. Keck provided an update on activities of the Academic Health Department (AHD) Learning Community.

The newest activity of the AHD Learning Community is the creation of a staged model of AHD development to better articulate how AHD partnerships may develop. AHD partnerships can take a variety of forms and their development may

Suggestions related to the draft staged model of AHD development may be shared with
follow various trajectories. The concept paper describing AHD partnerships developed by the Council in 2011 loosely defined characteristics of AHDs. The current draft of the staged model illustrates the potential development of AHD partnerships as a continuum. The draft model describes partnership development as a series of five stages ranging from informal relationships to the signing of formal affiliation agreements to comprehensive collaboration on education, research, and service with shared resources and personnel. This working draft is being shared with the Learning Community for feedback and will be made available through the Council website for public comment. The draft of the model was also presented at the National Association of County and City Health Officials’ 2017 Annual Meeting and will be shared at the APHA Annual Meeting this fall. Input on the draft is welcome, and feedback gathered will be used to refine the model.

The AHD Learning Community continues to hold meetings – now on a bimonthly basis – with the most recent meeting in May 2017 highlighting the newly formed AHD partnership between the University of Illinois at Chicago's School of Public Health and the Chicago Department of Public Health. The next meeting will be held on July 26, 2017 and will feature the AHD partnerships of East Tennessee State University's College of Public Health.

The new quarterly Ask the AHD Expert series has now published two columns on the PHF Pulse blog, the first in March 2017 and the second in June 2017, and the AHD Mentorship Program, which connects individuals seeking guidance in an area of AHD development or operation with those having experience in that area, continues to develop. Fifteen mentor/mentee pairs are participating in the program, and additional participants are welcome. There is a particular need for mentors currently, as the number of mentees has surpassed that of mentors.

Similar to the Core Competencies, the impact of the AHD Learning Community can be demonstrated in a number of ways. Membership in the Learning Community has continued to grow, with approximately 700 people currently participating. The Learning Community and its resources and tools have been accessed nearly 40,000 times online since its launch in 2011. Online access to these resources has increased from approximately 1,800 views in FY11 to more than 7,000 views in FY17. The four blog posts published on the PHF Pulse blog in FY17 related to the Learning Community were viewed nearly 900 times, and Learning Community meetings were attended by more than 120 participants. In FY17, Council staff responded to

Kathleen Amos at kamos@phf.org.

Expressions of interest in participating in the AHD Mentorship Program as either a mentor or mentee may be sent to Janelle Nichols at jnichols@phf.org.

Input on the types of data or examples that can help illustrate the reach and use of products related to the AHD Learning Community can be sent to Kathleen Amos at kamos@phf.org.
more than 25 requests for technical assistance, serving more than 20 organizations in 15 states. As with the Core Competencies, input is welcome on the types of data or examples that can help illustrate the reach and use of the Learning Community.

| Other Business and Next Steps | Dr. Keck asked if there was any other business to address. Kathleen Amos, MLIS, Council Assistant Director, provided an update on planning for the Council Chair election. An election for the position of Council Chair is held every two years, and the next election will be this summer. To be eligible to serve as Chair, there are two main requirements of Council representatives:

- Must have served as a Council representative for at least two years; and
- Must have experience working in public health practice.

The election process consists of a call for nominations followed by a vote, both of which are conducted by email, and Council staff will be in touch following the meeting to begin this process.

Dr. Keck provided an update on the discussion during the April 2017 Council meeting about members sharing their organizations’ activities with the Council. A number of data points related to the Core Competencies and AHD Learning Community were shared during this meeting as one way to begin to illustrate the impact of Council activities and help set the stage for a more substantive discussion about the impact of the Council and its products during the next Council meeting. Interest remains in hearing from Council members about their organizations’ activities and how they align with, support, or reinforce the Council’s Strategic Directions and in sharing that information to highlight and celebrate the impact the Council and its member organizations are able to achieve by working collectively. Council staff are working on creating a way for this information to be shared through the Council website, and more information about this will be provided in the future.

The next Council meeting will be on Monday, October 2, 2017 from 2-4pm ET and will be held virtually. The final meeting of the year is scheduled for December 12th. |

Council staff will follow-up to initiate the Council Chair election process following the meeting. Council staff will follow-up with Council members for information about how their organizations’ activities align with, support, or reinforce the Council’s Strategic Directions and will determine how to share this information.

Any questions about Council meetings can be sent to Janelle Nichols at jnichols@phf.org.