Academic Health Department Learning Community
The Academic Health Department (AHD) Learning Community was launched in January 2011 to bring together practitioners, educators, and researchers interested in the use of the AHD model to improve public health. Guided by the AHD Workgroup, the Learning Community connects public health professionals to share knowledge and engage in collaborative activities to support the development, maintenance, and expansion of AHDs. In the year since its launch, the Learning Community has grown to include over 100 members from 32 states, the District of Columbia, and six national organizations. It has held four meetings, including an in-person meeting during the American Public Health Association (APHA) Annual Meeting last fall; outlined the AHD model; and begun collecting partnership agreements, developing profiles of Learning Community members, and stimulating discussion online. Topics addressed by the Learning Community have included the definition of an AHD, benefits and challenges of forming an AHD, how to begin developing an AHD, and how to maintain and expand new and established AHDs.

In the upcoming year, the Learning Community is planning to hold approximately quarterly meetings and focus on supporting its members in their AHD efforts through network building and resource development. It will continue working to identify existing AHDs and building the collection of agreements that established these partnerships. The next Learning Community meeting will likely be held in spring 2012.

Core Competencies for Public Health Professionals
Work of the Core Competencies Workgroup is focused on developing a Competencies to Practice Toolkit to aid practitioners in using the Core Competencies for Public Health Professionals (Core Competencies). The toolkit will contain competency assessments, examples to clarify the language of competencies (e.g.s), a cultural competency tool, quality improvement tools, and samples of competency-based job descriptions, among other items.

Competency assessments have been developed for each tier of the Core Competencies and enable the determination of an individual’s current level of competence and the identification of domains in which further training may be desirable. These assessment tools will be made accessible from TRAIN, the Public Health Foundation’s learning management system, to support individuals in connecting assessment results with training opportunities. Brief examples to help clarify competencies have been drafted, as has a separate tool providing more detailed examples of important factors and considerations related to diversity and cultural differences. Quality improvement tools nearing completion include a radar chart and a prioritization matrix. Finally, samples of job descriptions that incorporate the Core Competencies are beginning to be collected. All tools will be posted on the Council on Linkages website as they are completed.

Recruitment and Retention
Through the 2010 Public Health Workers Survey, data related to the decision to enter and remain in the public health workforce were collected from over 11,000 public health professionals. Preliminary analyses of these data have been presented at several national conferences, most recently the 2011 APHA Annual Meeting. The final report of this survey is
being written and is expected to be completed in early 2012. The Pipeline Workgroup will next focus its attention on the workforce provisions in the Affordable Care Act.

**Public Health Training Impact**

To support the ongoing training of public health professionals, the Public Health Training Impact initiative was launched last fall to identify methods and tools to improve and measure the impact of training. This effort is guided by the Training Impact Task Force (Task Force), which consists of 11 experts in training and evaluation. Task Force members were drawn from academia, practice, and the private sector, and work both inside and outside of the public health field. The Task Force has met via conference call four times since September, working to create a document containing strategies and methods for enhancing and evaluating the impact of training for public health workers. Resources, such as references, tools, and examples, are being collected to support the strategies. A selective literature review of current work related to training and evaluation will also be conducted as part of this initiative. Final products are expected by the fall of 2012.