ASPPH Presents Webinar Series

Council on Linkages' Revised Core Competencies for Public Health Professionals – Applying the Core Competencies

Wednesday, January 28, 2015 2:00-3:00 pm Eastern

ASPPH.ORG

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Sponsored by:









Kathleen Miner, PhD, MPH, MEd



 ${\sf Kathleen\ Amos,\ MLIS}$

Today's Presenters



Marita Murrman, EdD, MS



Jennifer Kolker, MPH

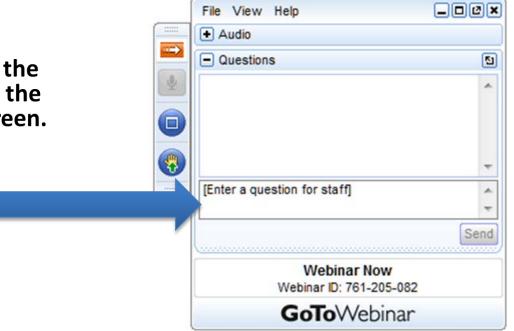


Method for Submitting Questions

Join the Conversation...

 You can ask questions in writing anytime during the webinar.

 Simply type them in the "Questions" field on the right side of your screen.





Today's Agenda

- Competency Description (Kathleen Miner, PhD, MPH, MEd)
- Overview of 2014 Core Competencies for Public Health Professionals (Kathleen Amos, MLIS)
- Using Core Competencies for Public Health Professionals in Developing Curricula in Academic Setting (Marita Murrman, EdD, MS)
- Using Core Competencies for Public Health Professionals in Developing Trainings for the Public Health Workforce (Jennifer Kolker, MPH)
- Competencies and Accreditation (Kathleen Miner, PhD, MPH, MEd)
- Addressing Questions from Audience (All)



Presenter



Kathleen Miner, PhD, MPH, MEd

Emory University Rollins School of Public Health



Competency Description

Kathleen Miner, PhD, MPH, MEd Emory University Rollins School of Public Health



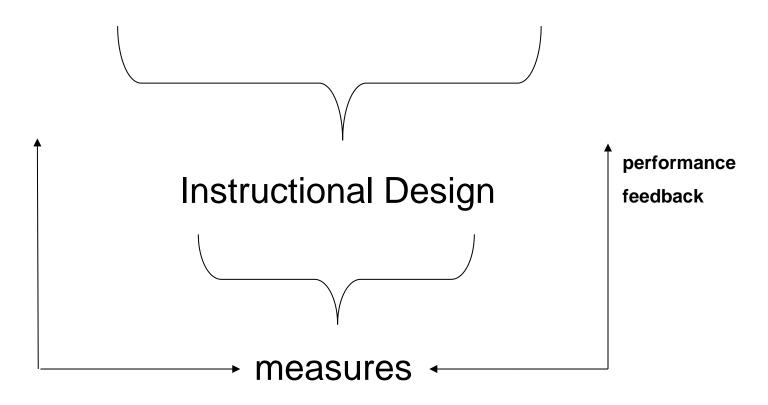
Competencies: Where are They?

- Organizations
 - Vision statements
 - Policy priorities/scope of practice
 - Job descriptions
 - Job functions
- Academic Settings
 - Degree programs
 - Course descriptions
 - Syllabi
 - Student assessment/Test development



The Anatomy of an Instructional Competency Statement

Single Verb + Specific Content Statement





Competency Statement Structures

- Each statement may have only one verb.
 - (Multiple verbs turn single competencies into multiple competencies.)
- Each statement needs a verb that is measurable. A verb—like understand can not be measured.
 - (Understanding to one person is not understanding to another.)
- Verbs can be found from general lists (Blooms Taxonomy, Affective Domain) or professional practice lists (e.g.; ASPPH, Council on Linkages, medicine, mathematics, pharmacy).
 - (The verb should reflect expected level of mastery for the learner performing the content statement associated with the competency.)



Competency Statement Parameters

- Each statement should have no hidden modifiers, such as adequate, appropriate, suitably, and the like.
 - (Adjectives, such as these, imply standards that are subjective. If there are standards, they need to be widely agreed upon (e.g.; JCAHO, CEPH, PHAB). From an instructional perspective, no one would be taught to be perform a competency inadequately.)
- If there are competency domains, each competency should be listed only once in the domain framework.
 - (Each domain needs to be able to stand alone or it is not a domain.)



Presenter



Kathleen Amos, MLIS

Public Health Foundation



2014 Core Competencies for Public Health Professionals

Kathleen Amos, MLIS
Council on Linkages Between Academia and Public Health Practice
Public Health Foundation



Council on Linkages Between Academia and Public Health Practice

- To improve public health practice, education, and research by:
 - Fostering, coordinating, and monitoring links among academia and the public health and healthcare community;
 - Developing and advancing innovative strategies to build and strengthen public health infrastructure; and
 - Creating a process for continuing public health education throughout one's career.

Funded by Centers for Disease Control and Prevention

Staffed by Public Health Foundation

20 National Public Health Organizations:

- American Association of Colleges of Nursing
- American College of Preventive Medicine
- American Public Health Association
- Association for Prevention Teaching and Research
- Association of Accredited Public Health Programs
- Association of Public Health Laboratories.
- Association of Schools and Programs of Public Health
- Association of State and Territorial Health Officials
- Association of University Programs in Health Administration
- Centers for Disease Control and Prevention
- Community-Campus Partnerships for Health
- Health Resources and Services Administration
- National Association of County and City Health Officials
- National Association of Local Boards of Health
- National Environmental Health Association
- National Library of Medicine
- National Network of Public Health Institutes
- National Public Health Leadership Development Network
- Quad Council of Public Health Nursing Organizations
- Society for Public Health Education



Core Competencies for Public Health Professionals



- Are a set of skills desirable for the broad practice of public health
- Reflect characteristics that staff of public health organizations may want to possess as they work to protect and promote health in the community
- Are designed to serve as a starting point for practice and academic organizations to understand, assess, and meet training and workforce needs



Core Competencies for Public Health Professionals

- 8 Domains:
 - Analytical/Assessment Skills
 - Policy Development/Program Planning Skills
 - Communication Skills
 - Cultural Competency Skills
 - Community Dimensions of Practice Skills
 - Public Health Sciences Skills
 - Financial Planning and Management Skills
 - Leadership and Systems Thinking Skills
- 3 Tiers:
 - Tier 1 Front Line Staff/Entry Level
 - Tier 2 Program Management/Supervisory Level
 - Tier 3 Senior Management/Executive Level



Who Uses the Core Competencies?

- ~60% of State Health Departments (ASTHO, 2014)
- ~26% of Local Health Departments (NACCHO, 2013)
- >90% of Academic Public Health Programs (Council on Linkages, 2006)
- Core Competencies are also used by:
 - CDC
 - HRSA's Public Health Training Centers
 - TRAIN affiliates
 - Healthy People 2020
 - Public Health Accreditation Board
 - Others......



Uses of the Core Competencies

- Job descriptions
- Performance objectives
- Performance reviews and evaluations
- Workforce competency/needs assessments
- Workforce development plans
- Training plans
- Curriculum and course review and development
- Discipline-specific competencies
- Preparing for accreditation



2014 Core Competencies for Public Health Professionals

- Adopted unanimously: June 26, 2014
- 3rd version released
- Extensive review and revision process: March 2013-June 2014
- Engagement of Council on Linkages member organizations, Core Competencies
 Workgroup members, other professionals and organizations



Feedback Received – Over 1,000 Comments

- Retain 8 domains
- Clarify and simply individual competencies
- Assure each competency is truly only one competency
- Add new concepts health reform, accreditation, social marketing
- Add more examples
- Reorder competencies in a more logical order
- Don't move competencies from one domain to another
- Add another tier
- Help with use of the Core Competencies



Clarify and Simplify

- **2010:** Applies communication and group dynamic strategies (e.g., principled negotiation, conflict resolution, active listening, risk communication) in interactions with individuals and groups (3B6)
- 2014: Facilitates communication among individuals, groups, and organizations (387)



Other Decisions

- Kept 8 domains number and topic areas
- Reordered individual competencies
- Competencies were not moved from one domain to another
- Greater assurance that each competency only represents one competency
- Development of an additional tier under discussion
- Tools are being revised and developed



Resources and Tools to Support Use

- Existing:
 - Crosswalk of 2010 and 2014
 Core Competencies
 - Self-assessment instruments
 - Job descriptions
 - Workforce development plans
 - Examples of use

- Coming Soon:
 - Revised prioritization sequence
 - Checklist for course providers
 - FAQs
 - Others?



Thank You!

- More information: www.phf.org/corecompetencies
- Stay informed: Council on Linkages Update email Janelle Nichols, <u>inichols@phf.org</u>
- Email questions: Kathleen Amos, kamos@phf.org



Presenter



Marita Murrman, EdD, MS

Columbia University Mailman School of Public Health



Using Competencies (CoL and others) in Developing Curricula in the Academic Setting

Marita K. Murrman, EdD, MS
Associate Professor of Sociomedical Sciences
Columbia University Mailman School of Public Health Curriculum Committee

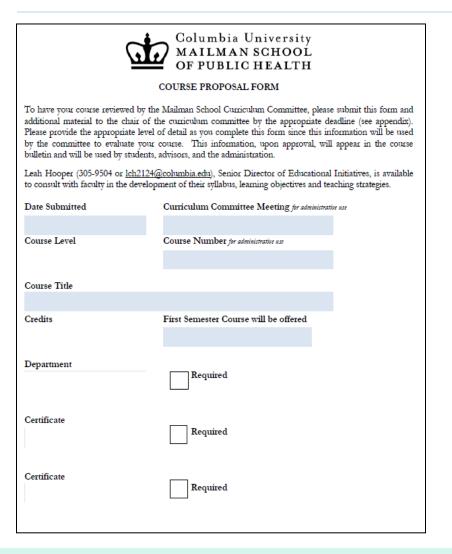


Process for Designing and Getting Approval for New Courses at CU-MSPH

- Faculty member:
 - Meets with Departmental Curriculum Committee
 - Completes <u>CU-MSPH Course Proposal Form</u> and <u>Course Template</u>
 - Submits completed form and template to CU-MSPH Curriculum Committee
 - Presents new course proposal and syllabus to CU-MSPH Curriculum Committee
- CU-MSPH Curriculum Committee:
 - Approves proposed course for new course number and listing or
 - Requests changes and resubmission



CU-MSPH Course Proposal Form



Course Instructor(s)	Academic Title	Dept	Phone	Email
Department Chair (selec	et one)			
I. Prerequisites				
Please list any prerequisite	s for the course including pern	nission of the i	nstructor	
None				
Yes (Explain reason be	elow)			
Please indicate how the co department, certificate, sch	ourse is similar to or overlaps in hool and/or university	n content with	other courses	or competencies in the
None Yes.	Specify overlapping course(s)			
Please explain the nature of	of overlap:			
	s co-development, cross-listic e sponsoring department of th			
•				
To my knowledge this c	ourse does not violate the M	Iailman Schoo	ol Policy on C	Course Duplication.
Signature of department	chair			
				2



II. Competencies and Learning Objectives Review your department's competencies and indicate which department or certificate competencies your	Please further identify how this course relates to the competencies of the department or certificate by checking the appropriate categories
proposed course addresses. For more information on department and certificate competencies, click <u>here</u> .	
	Is part of a learning sequence (or series of courses) for completion of a degree or certificate? If so, please explain.
List your course learning objectives below. For help writing learning objectives, click here.	
	III. Credit Hours and Time Allocated to Teaching and Learning
	Please review the appendix section on credit hours and based on this criteria and your course learning objectives fill in the table below. For more information on appropriate work outside class for each credit hour, please click <u>here.</u>
	Credits Number of Classes Number of Hours Semester Weekly Per Class
	Weday
	Hours Teaching and Learning for Week Hours Teaching and Learning for Semester
	In Class Outside of Class In Class Outside of Class





June 2014

Core Competencies for Public Health Professionals

Revised and Adopted by the Council on Linkages Between Academia and Public Health Practice: June 26, 2014

Available from: phf.org/corecompetencies



	Communication Skills								
Tier 1		Tier 2		Tier 3					
3A1.	Identifies the literacy of populations served (e.g., ability to obtain, interpret, and use health and other information; social media literacy)	251.	Assesses the literacy of populations served (e.g., ability to obtain, interpret, and use health and other information; social media literacy)	3C1.	Ensures that the literacy of populations served (e.g., ability to obtain, interpret, and use health and other information; social media literacy) is reflected in the organization's policies, programs, and services				
3A2.	Communicates in writing and orally with linguistic and cultural proficiency (e.g., using age-appropriate materials, incorporating images)	3B2.	Communicates in writing and orally with linguistic and cultural proficiency (e.g., using age-appropriate materials, incorporating images)	3C2.	Communicates in writing and orally with linguistic and cultural proficiency (e.g., using age-appropriate materials, incorporating images)				
3A3.	Solicits input from individuals and organizations (e.g., chambers of commerce, religious organizations, schools, social service organizations, hospitals, government, community-based organizations, various populations served) for improving the health of a community	3B3.	Solicits input from individuals and organizations (e.g., chambers of commerce, religious organizations, schools, social service organizations, hospitals, government, community-based organizations, various populations served) for improving the health of a community	3C3.	Ensures that the organization seeks input from other organizations and individuals (e.g., chambers of commerce, religious organizations, schools, social service organizations, hospitals, government, community-based organizations, various populations served) for improving the health of a community				
3A4.	Suggests approaches for disseminating public health data and information (e.g., social media, newspapers, newsletters, journals, town hall meetings, libraries, neighborhood gatherings)	3B4.	Selects approaches for disseminating public health data and information (e.g., social media, newspapers, newsletters, journals, town hall meetings, libraries, neighborhood gatherings)	3C4.	Evaluates approaches for disseminating public health data and information (e.g., social media, newspapers, newsletters, journals, town hall meetings, libraries, neighborhood gatherings)				



II. Competencies and Learning Objectives

Review your department's competencies and indicate which department or certificate competencies your proposed course addresses. For more information on department and certificate competencies, click here.

Assess Individual and Community Needs for Health Promotion

Plan Health Promotion Strategies, Interventions, and Programs

Implement Health Promotion Strategies, Interventions, and Programs

Administer Health Promotion Strategies, Interventions, and Programs

Conduct Evaluation and Research Related to Health Promotion

Communicate and Advocate for Health and Health Promotion

 Assess the literacy of populations served (e.g., ability to obtain, interpret, and use health and other information; social media literacy)

List your course learning objectives below. For help writing learning objectives, click here.

Discuss the health implications of low health literacy

Characterize the epidemiology of health literacy

Identify possible determinants and sequelae of low heath literacy

Analyze planning frameworks for communication and how they impact health literacy and its impacts at the individual, social and organizational levels

Integrate health literacy, media literacy, and cultural competence-related concepts and skills to critique development and evaluation planning for health communication interventions to advance health literacy

Utilize validated measures of health literacy including the REALM, TOFHLA, and NVS

Compare and contrast the utility of various validated measures for evaluating health education material

Demonstrate effective writing skills for communicating with low-literacy audiences

Assess current policy on health literacy and how it may impact public health

Identify research gaps in health literacy

Use health literacy principles to improve communication leveraging opportunitites to advocate for public health program support and policies

Please further identify how this course relates to the competencies of the department or certificate by checking the appropriate categories Is part of a learning sequence (or series of courses) for completion of a degree or certificate? If so, please explain. III. Credit Hours and Time Allocated to Teaching and Learning Please review the appendix section on credit hours and based on this criteria and your course learning objectives fill in the table below. For more information on appropriate work outside class for each credit hour, please click here. Number of Classes Number of Hours Per Class Semester Weekly Hours Teaching and Learning for Week Hours Teaching and Learning for Semester In Class Outside of Class In Class Outside of Class



VI. Cost to Student

Financial impact of course on student (books, software, etc.) per student \$

VII. Description for Course Bulletin

Please write a one paragraph statement suitable for inclusion in the course bulletin. Your description should address the following points. For more information on crafting a course description, click <u>here.</u>

- General description and overview of the course
- Specific learning objectives that identify what students who successfully complete the course will be
 able to demonstrate.
- Major teaching methods and the organization of the course including the use of discussion sections, media, invited speakers, field trips, etc.
- Nature and extent of requirements from students and procedures for evaluating students such as lab
 exercises, paper, examination, etc.

VIII. Svllabus

Please complete the below syllabus template available <u>here</u>. For more information about completing all aspects of your syllabus, click <u>here</u>.

Your syllabus should be informed by your course learning objectives and should be sure to include:

- Schedule of topics for all sessions (14 weeks in a semester) including the assigned readings
- Criteria for assessing student learning including a description of assignments, class participation, labs, exams, etc. This section should clearly indicate the percent or point allocation of each item.



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- Nature and extent of requirements from students and procedures for evaluating students such as lab exercises, paper, examination, etc.

Health Literacy is defined in Healthy People 2010 as "the degree to which individuals have the capacity to obtain, process and understand basic health information and services for appropriate health decisions." In this course we will explore the multi-layered interactions between health and health literacy. We will begin by examining the issues related to literacy in the US and transition to the concept of health literacy. We will discuss issues related to reading comprehension, and usability of health related materials. The class will learn about the measurement of health literacy; policy to promote it; and the development of appropriate health materials for print, visual, auditory and Internet venues. It will also illustrate how understandling the changing models of communication over time is important to the understanding of health literacy in practice. The course will examine different health situations utilizing a health literacy approach including the research participants and informed consent, health literacy and medication/adherence, patient-physician communication models, and risk comprehension. We will also examine specific topics including aging and emergency preparedness. Finally, you will identify a brochure, form, website, or other communication product that can be improved to better serve a low-literacy audience and rework it to do so. The classes are designed to include a mixture of didactic lectures, analysis of reading materials, group discussion and exercises.

VIII. Svllabus

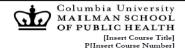
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- Criteria for assessing student learning including a description of assignments, class participation, labs, exams, etc. This section should clearly indicate the percent or point allocation of each item.



CU-MSPH Course Template



CLASS SESSIONS

[Insert Class Day(s)], [Insert Class Start Time] - [Insert Class End Time], [Insert Location]

INSTRUCTOR

[Insert Name], [Insert Degree] [Insert Phone], [Insert Email]

[Insert Office Location]; [Insert Office Hours]

TEACHING ASSISTANT(S) [if applicable]

[Insert Name] [Insert Email]

Insert Office Hours

COURSE DESCRIPTION

Insert

PREREQUISITES

[Insert Prerequisites e.g. P6103: Introduction to Biostatistics or note none]

COURSE LEARNING OBJECTIVES

- to leasts who successfully complete this course wil
- insert
- [insert]
- [insert]
- insert
- insert
- insert

ASSESSMENT AND GRADING POLICY

[Insert] [#] points [or percen	tage
[Insert] [#] points [or percen	tage
[Insert] [#] points [or percen	
[Insert] [#] points [or percen	tage

[Insert description of assessment methods]

COURSE REQUIREMENTS

[Insert expectations related to class performance and policies related to late assignments, attendance, original work, citations, incomplete grades, etc.]

COURSE STRUCTURE

[Insert how the course will be organized and conducted. It may indicate, for example, whether the class sessions will be lectures, seminars, group work, breakout sections, lab sections; combinations of these, and so on. If the course is organized into units, this section can also describe these units]

Department of [insert department name]

[insert semester] [insert year]

COURSE SCHEDULE

Please see the lecture section of Courseworks to download the readings, exams, and lecture slides.

Session 1 – [insert session title, e.g. Introduction to Case-Control] [Date] Learning Objectives:

Reading:

Assignment: [if applicable]

Session 2 - [insert session title]

[Date] <u>Learning Objectives</u>:

Reading:

Assignment: [if applicable]

Session 3 - [insert session title]

[Date] Learning Objectives:

Reading:

Assignment: [if applicable]

Session 4 - [insert session title]

Date | Learning Objectives:

Reading:

Assignment: [if applicable]

Session 5 - [insert session title]

[Date] Learning Objectives:

Reading:

Assignment: [if applicable]

P[insert course number] – [insert course title]

3 of 5



Course Syllabus



CLASS SESSIONS

Wednesdays, 5:30 pm - 8:20 pm, Rosenfield Building, Room 532A/B



TEACHING ASSISTANT

Health Literacy is defined in Healthy People 2010 as "the degree to which individuals have the capacity to obtain, process and understand basic health information and services for appropriate health decisions." In this course we will explore the multi-layered interactions between health and health literacy. We will begin by examining the issues related to literacy in the US and transition to the concept of health literacy. We will discuss issues related to reading comprehension, and usability of health related materials. The class will learn about the measurement of health literacy; policy to promote it; and the development of appropriate health materials for print, visual, auditory and internet venues. It will also illustrate how understanding the changing models of communication over time is important to the understanding of health literacy in practice. The course will examine different health situations utilizing a health literacy approach including the research participants and informed consent, health literacy and medication/adherence, patient-physician communication models, and risk comprehension. We will also examine special topics including ageing and emergency preparedness. Finally, you will identify a brochure, form, website, or other communication product that can be improved to better serve a low-literacy audience and rework it to do so. The classes are designed to include a mixture of didactic lectures, analysis of reading materials, group discussion and exercises.

PREREQUISITES

None

COURSE LEARNING OBJECTIVES

Students who successfully complete this course will be able to:

- Discuss the health implications of low health literacy
- Characterize the epidemiology of health literacy
- Identify possible determinants and sequelae of low health literacy
- Analyze theoretical influences, models, planning frameworks for communication and how
 they impact health literacy and its impacts at the individual, social and organizational levels

Department of Sociomedical Sciences

Fall 2014

ASSESSMENT AND GRADING POLICY

Student grades will be based on:

- 15% Class participation
- 15% 1 presentation of a health literacy topic;
- 15% 1 low-literacy summary of a current health topic
- 25% Midterm paper: assessment of an existing health campaign.
- 30% Final project: Communication deliverable revision.

ASSIGNMENTS

One 5-minute oral presentation (15% of grade)

You will select a health literacy topic and present a critical analysis or synthesis of it along with <u>one</u> slide. You may ground your presentation in a class or other reading, a current event, or your own thoughts. The goal is to apply a health literacy lens to the topic and offer your synthesized perspective in a nutshell.

<u>Deliverable</u>: Presentation NO LONGER than 5 minutes using NO MORE THAN one slide. This will be strictly enforced. Due throughout the semester. A signup sheet will be circulated for specific dates

One low-literacy summary of a health topic (20% of grade)

You will develop a one to two-page low-literacy summary of the literature on a health topic recently in the news. This summary should be written at a 4th grade reading level and expand upon the topic. You will need to analyze the article or story in the news and assess what is correct or not about it and ensure that you convey this to your audience. Your summary will offer guidance on understanding the topic for the general public and be grounded in scientific literature.

<u>Deliverable: 1-2 page paper.</u> Due by November 5th at the latest, but you may turn this in earlier in the semester, as well.

Mid-term Assignment (25%): Analysis of existing multi-component campaign. Select an existing communication campaign focusing on health. Assess all aspects of literacy as you critique this campaign using the guidelines for advancing health literacy in Chapter 14 of Advancing Health Literacy.

Deliverable: Paper. Due October 22nd.

Final Assignment (30%): You will identify a brochure, form, website, or other communication product that can be improved to better serve a low-literacy audience. A list of possible real-world projects will be made available. You will present your project to the class at the end of the semester. Deliverable: New deliverable; Powerpoint Presentation on how you created it. Due December 3rd.

COURSE STRUCTURE

P8776.001 - Advancing Health Literacy

2 of 10



CU-MSPH Committee Statistics for Fall, 2014

- Number of courses reviewed: 11
- Number of courses approved: 9 (6 new courses, 3 title changes)
- Number of courses pending approval: 1
- Number of courses rejected: 1
- Number of 6000 level courses: 2 (1 new course, 1 title change)
- Number of 8000 level courses: 9 (7 new courses, 2 title changes)
- Number of 9000 level courses: 0



Presenter



Jennifer Kolker, MPH

Drexel University School of Public Health



How We Use Competencies in Developing Trainings for the Public Health Workforce

Jennifer Kolker, MPH
Drexel University School of Public Health



What does it mean to be competent?

- com·pe·tent
 - having the necessary ability, knowledge, or skill to do something successfully. "a highly competent surgeon"
 - (of a person) efficient and capable. "a competent carpenter"
 - acceptable and satisfactory, though not outstanding.
- capable of performing the normal function effectively.
- Origin
 - late Middle English (in the sense 'suitable, adequate'): from Latin competent-, from the verb competere in its earlier sense 'be fit or proper' (see compete).



Council on Linkages Core Competencies

- Are a set of skills desirable for the broad practice of public health.
- Reflect characteristics that staff of public health organizations may want to possess as they work to protect and promote health in the community.
- Are designed to serve as a starting point for practice and academic organizations to understand, assess, and meet training and workforce needs.



Using Competencies to Determine Training Needs

- Competencies are used to develop the framework for assessing training needs through formal or informal needs assessments.
- Training needs assessments help employers identify strengths and gaps in their workforce by measuring employee skills and knowledge against the competencies.
- Similarly, training needs assessments enable employees to reflect upon what they do and whether they have all the skills and knowledge they need or want to do their jobs, and what they would like to learn.



Developing a Common Language

- Important to remember that the workforce does not always use the language of the CoL competencies.
- Development and delivery of training is an opportunity to develop a common language and disseminate the competencies to the workforce.



Example 1: Health Department Training Needs Assessment

Division XXX:

- Tier 1 employees were reported to have low or no proficiency in areas of Financial Planning and Management Skills, Public Health Sciences Skills, and Leadership and Systems Thinking Skills.
- The major gap from the Tier 2 self-reports was in the area of Financial Planning and Management Skills.
- Staff had a wide range of training interests, including: Public Health Data Sources, Evidence-Based Practices, Continuous Quality Improvement, Interpersonal/Workplace Communications, Microsoft Project, and Informatics.
- Based on the needs assessment, other recommended trainings would cover skill sets specific to employees' daily activities involving financial planning and utilizing research.



Example 2: Health Department Training Needs Assessment

- Division XXX:
 - Supervisors of Tier I employees indicated low confidence in employees' skills in a
 wide range of competency areas, including Analytical/Assessment Skills, Policy
 Development/Program Planning, and Financial Planning and Management Skills.
 Notable issues included: the ability to apply ethical principles to data and
 information, communicating information to influence behavior and improve health,
 and the ability to recognize relationships that affect health in a community.



Example 2: Health Department Training Needs Assessment (continued)

- Tier 2 staff self-reported gaps in Leadership and Systems Thinking and Financial Planning and Management Skills, with an overwhelming majority of low scores in the area of Public Health Sciences Skills, including identifying requirements for ethical conduct of research, the ability to contribute to the research community, and explaining funding mechanisms and procedures.
- Respondents expressed interest in trainings on Surveillance Use & Practices,
 as well as supervisor training for senior staff. However, results from the needs
 assessment show a clear need for training in the area of research and ethics,
 as well as basic issues in community health and communication.



Targeting Training Content

- Use results of your needs assessment to develop a training plan
 - Once you have a roadmap for training content, you need to determine which competencies you will focus on and how you will use training to increase the competency of your audience.
 - By using the competencies, training can be developed that can meet a specific area of skill need or a range of skills and knowledge identified as a gap.
 - Sometimes the training needs for the job function and what employees want to learn don't match—need to find a way to make it work.



Targeting Training Content (continued)

- Need to decide if a training is going to be broad/shallow or narrow/deep.
 - Measurement!
- Think about training as a process, not a single event
 - Competencies provide a path for sequencing of training and building skills.
 - Competency is achieved over time; expertise takes even longer



Tips and Traps

- Use the competencies to Develop a common language
 - Remember that the workforce does what they do and does not necessarily use the language of the competencies-responsibility of those developing trainings to make the match.
 - Often, the competence is there but the language different.
- Spend time on the Tiers!
 - People's jobs often don't fit neatly into one of the Tiers, depending on the size and capacity
 of the workforce.
 - Need to tease out what their responsibilities are and adapt as necessary.



Tips and Traps

- Keep it real!
 - Don't rely on the theoretical language of the competency itself.
 - Tie the competencies to actual examples and job functions. Use case studies, role-plays, etc., where possible.
- Often what appears as a lack of competency in the workforce is really a lack of capacity in the workplace—be creative and respectful as you work with your audience to address.



Presenter



Kathleen Miner, PhD, MPH, MEd

Emory University Rollins School of Public Health



Competencies and Accreditation

Kathleen Miner, PhD, MPH, MEd Emory University Rollins School of Public Health

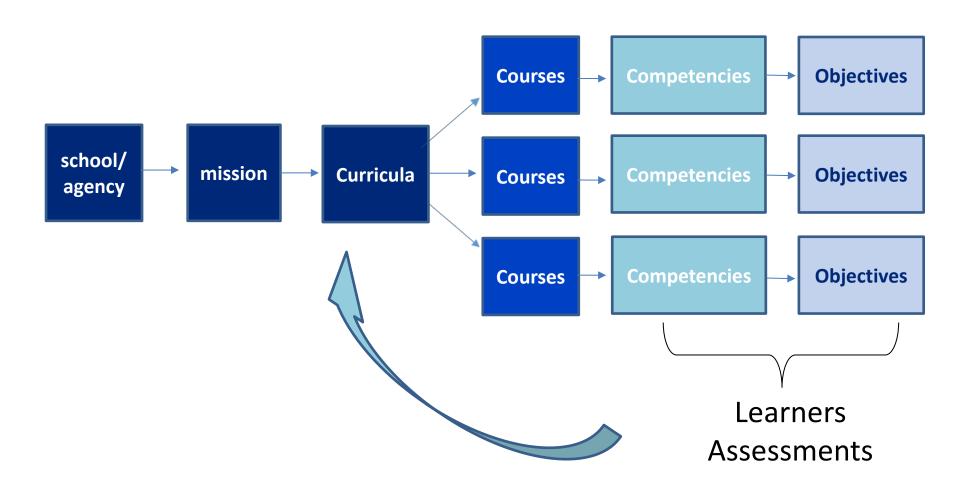


Competencies and Accreditation

- Competencies describe the function of professionals.
- The use of the public health competencies in practice (PHAB) and academic accreditation (CEPH) are similar.
- The accreditation process is an assessment process.
- For the practice setting, the competencies assess the need for new and updated skills in the workforce.
- For the academic setting, the competencies assess the relevance of the curriculum and the readiness of the learners to enter the workforce.



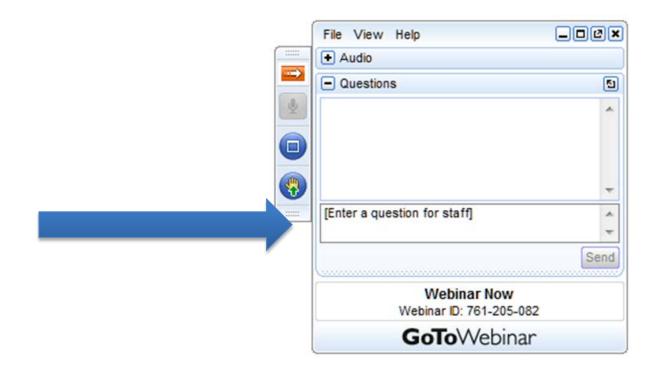
Competencies and Accreditation





Questions and Comments?

Join the Conversation...





Thank you!



See the webinar event page on the ASPPH website:

http://www.aspph.org/event/aspph-presents-webinar-councilon-linkages-revised-core-competencies-for-public-healthprofessionals-applying-the-core-competencies/

for a link to the archived webinar



Coming Attractions...

ASPPH Presents Webinar

featuring the FTF

Community Colleges & Public Health
Report
in Spring 2015



