PHAB Domain 8 Maintain a Competent Public Health Workforce

ASTHO Accreditation Webinar Series

April 9, 2013

Association of State and Territorial Health Officials
Acknowledgement and Disclaimer

- This webinar was supported by funds made available from the Centers for Disease Control and Prevention, Office for State, Tribal, Local and Territorial Support, under grant #5U38HM000454–05.

- The content of this webinar are those of the authors and do not necessarily represent the official position of or endorsement by the Centers for Disease Control and Prevention.
Webinar Objectives

Provide two state case study examples that demonstrate:

- Implementation of a workforce needs assessment as it relates to PHAB Domain 8
- Implementation of a workforce development plan as it relates to PHAB Domain 8
Our presenters today in order of appearance…

1. Kimberly Facer, M.S.  
   Workforce Development Grant Coordinator, Florida Department of Health

2. Debra Bragdon, B.S., ASQ–CQIA  
   Workforce Development Manager, Florida Department of Health

3. Deborah Boyer, B.S., SPHR  
   Director of Human Resources, Oklahoma State Department of Health
POLL QUESTION
POLL QUESTION
Presentation Outline

1. Florida Department of Health (FDOH) Profile
2. Office of Performance and Quality Improvement (OPQI) Overview
3. Current Status of FDOH Accreditation Pursuits
4. Process to Create Agency Workforce Development (WFD) Plan
5. Next Steps
6. Lessons Learned
FDOH Profile

- Centralized public health department

Organization Overview

- County Health Departments (CHDs) 67
- Children’s Medical Service Offices 22
- Central Office Divisions and Offices 16
- Medical Quality Assurance Investigative Offices 11
- Disability Determination Offices 9
- Public Health Laboratories 4
Three sections within the Office of Performance and Quality Improvement:

1. Workforce Development
2. Performance Improvement
3. Public Health Nursing
Current Status of FDOH Accreditation Pursuits

- **2009-2010**: Participated in PHAB Beta Test

- **2009 to Current**:  
  - Determined availability of prerequisites  
  - Conducted systematic review of local prerequisites for completeness  
  - Developed State Health Assessment, State Health Improvement Plan and Agency Strategic Plan  
  - Completed self assessment of standards & measures for state and local health departments
Current Status of FDOH Accreditation Pursuits

- Discussed system and evidence gaps
- Identified potential strategies to address

Summary of Measures Status by Domains

<table>
<thead>
<tr>
<th>Domain Numbers</th>
<th>Percentage of Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No Response</td>
</tr>
</tbody>
</table>

Protect, promote and improve the health of all people in Florida.
### Domain 8: Initial Assessment Results

<table>
<thead>
<tr>
<th>Measure</th>
<th>Evidence Availability</th>
<th>Action Required</th>
<th>Owner</th>
<th>Potential Evidence (Documents)</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.1.1 S - Establish relationships and/or collaborate with schools of public health and/or other related academic programs that promote the development of future public health workers.</td>
<td>Exists - S</td>
<td>Gather Evidence, Post to Shared Drive, Validate Conformity with Standard/Measure</td>
<td>OPQI</td>
<td>The Child Care Food Programs have two formal agreements one with Florida State University (FSU), Department of Nutrition, Food and Exercise Sciences and one with the Florida Department of Agriculture and Consumer Services (DOACS), Dietetic Internship Program. For the FSU students, staff provide practical instruction and field experience for graduate students in Nutrition and Food Sciences. For DOACS, staff provide dietetic interns two weeks of learning experience in the area of USDA Child Nutrition Programs, and developing and/or presenting nutrition education curriculum to attain education experience. Documentation: For FSU students, there are agreed upon performance standards and learning objectives are formally evaluations. Records and reports are maintained. For DOACS interns, program objectives and formal evaluation of the intern's performance are provided. Documentation for both agreements can be provided by the Bureau of Child Care Food Programs. DDOHP60-36.pdf (2010 Mentoring Initiative &amp; Community Service Programs Policy); Human Resource Management vAttachment: Student Feedback on the Summer Rotation Experience 2012.pdf; Other Collaborations include...</td>
</tr>
<tr>
<td>8.1.1 T/L - Establish relationships that promote the development of future public health workers.</td>
<td>Exists - 62 Partially Exists - 1 Does Not Exist - 2 NoResponse - 2</td>
<td>Gather Evidence, Post to Shared Drive, Validate Conformity with Standard/Measure</td>
<td>OPQI</td>
<td>Each year, the WIC supported Pasco County Dietetic Internship Program offers an opportunity for 18 DOH nutrition employees statewide to complete a required internship program necessary to become a licensed and registered dietitian. Interns may earn graduate credits at the University of North Florida. Documentation: Program records from the Bureau of WIC Program Services and the Pasco County Health Department.</td>
</tr>
<tr>
<td>8.2.1 A - Maintain, implement and assess the health department workforce development plan that addresses the training needs of the staff and the development of core competencies.</td>
<td>Exists - S</td>
<td>Update Agency Workforce Development and Implementation Plan (6/30/15), including plan to fully implement competency-based recruitment, development and evaluation system; Develop and deploy template for local WFD addenda;</td>
<td>OPQI</td>
<td>DCO Workforce Development Plan; TRAIN Learning/Management System;</td>
</tr>
<tr>
<td>8.2.2 A - Provide leadership and management development activities.</td>
<td>Exists - S</td>
<td>Gather Evidence, Post to Shared Drive, Validate Conformity with Standard/Measure</td>
<td>OPQI</td>
<td>DCO Leadership Institute roster for Leadership Institute - emails, etc that outline the course and the participants that have come from anywhere in the state - pilot and current year sessions ELOP policy list of employees who have their FPHLA membership dues paid for by the Department roster of those who attended the Six Sigma training; Need 2nd Example Could look at membershps paid for professional organizations (FPHLA, APHA, etc) Gather participation in NIH Public Health Leadership Institute, Environmental Public Health Leadership Institute...</td>
</tr>
<tr>
<td>8.2.3 S - Provide consultation and/or technical assistance to Tribal and local health departments regarding evidence-based and/or promising practices in the development of workforce capacity, training and continuing education.</td>
<td>Exists - S</td>
<td>Gather Evidence, Post to Shared Drive, Validate Conformity with Standard/Measure</td>
<td>OPQI</td>
<td>Evidence-Based Public Health Practice series sponsored by Chronic Disease; registration through Trak-It; Emails from VFD to the CHDs regarding availability of county specific needs assessment reports (posted on Sharepoint) Reports posted on sharepoint - needs assessment data for each county Workforce Development components of a VFD plan - video conference (email announcement and actual recording and template designed for counties to use to create a VFD plan); Other examples: mini-grants through CDC Infrastructure grant to support VFD plan development locally; VFD website resources...</td>
</tr>
</tbody>
</table>
Current Status of FDOH Accreditation Pursuits

Next Steps

- Support completion of all pre-requisites by June 30, 2013
- Develop action plan to address system gaps
- Gather evidence and review for conformity
- Identify innovative ways to educate staff on standards and measures
Workforce Needs Assessment and the Agency Workforce Development Plan

- Workforce needs assessment is a component of the Agency WFD Plan

- **Plan goal:** create a 5 year WFD Plan that builds upon existing strengths of the FDOH workforce and addresses identified gaps through a strategic and focused plan.
Agency Workforce Development Plan Overview

- Funding provided by CDC, “Strengthening Public Health Infrastructure for Improved Health Outcomes” grant.
- Project timeline: May 2011 – April 2012
- Created in collaboration with the following:
  - Quad R
  - County Health Department Directors
  - Central Office Leadership
  - The Florida Public Health Training Centers
Process to Create the Agency Workforce Development Plan

Four step process to create Plan:
1. Acquired data
2. Conducted a gap analysis
3. Created the comprehensive plan
4. Developed implementation plan
1. Acquired Data

- External Resources
  - U.S. Census
  - Center for Disease Control

- Internal Resources
  - FDOH profile
  - FDOH needs assessment survey
  - Leadership phone interviews
  - Leadership online survey
FDOH Needs Assessment Survey

- **Conducted:** May 3-20, 2011
- Assistance provided by the University of South Florida and University of Puerto Rico – Florida International University Public Health Training Centers
- **Respondent audience:** all FDOH employees
  - 5,762 respondents accessed survey (32.3% of FDOH employees)
  - 3,635 respondents completed the entire survey (20.7% of FDOH employees)
Acquired Data from Internal Resources

FDOH Needs Assessment Survey cont.

- 86 questions within six sections:
  1. Experience in Public Health
  2. Perception of Confidence for Public Health Professionals
  3. Perception of Competence Related to Public Health Preparedness and Response
  4. Capacity Technology and Business Development
  5. Demographic Information
  6. Public Health Matters
Part I: Experience in Public Health

Survey item topics include the following:

- Length of employment
- Classification and location of current employment
- Self-rating of knowledge in public health
- Interest in mentor or mentee opportunities
FDOH Needs Assessment Survey

Part I: Experience in Public Health cont.

Survey item topics include the following:

- Knowledge of Workforce Development resources
- Participation in training and development opportunities

Example survey item and response data

<table>
<thead>
<tr>
<th>Answer Options</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never participated in professional development or continuing education</td>
<td>6.8%</td>
<td>363</td>
</tr>
<tr>
<td>Less than one year</td>
<td>71.8%</td>
<td>3827</td>
</tr>
<tr>
<td>1 to 3 years</td>
<td>16.0%</td>
<td>855</td>
</tr>
<tr>
<td>4 to 10 years</td>
<td>4.2%</td>
<td>226</td>
</tr>
<tr>
<td>More than 10 years</td>
<td>1.2%</td>
<td>62</td>
</tr>
</tbody>
</table>

answered question 5333
skipped question 306
Part II: Perception of Confidence for Public Health Professionals

- Survey item topics include the following:
  - Level of knowledge or skill for all 8 Core Competency domains
  - 4 competencies per domain
Part II: Perception of Confidence for Public Health Professionals

Example Competency Response results:

- Identify the health needs of the populations served.
- Communicate in writing and orally, both in person and by telephone.
- Communicate using various electronic means, with written and oral presentation.
- Participate in the development of presentations with demographic, statistical, and cost data.

![Graph showing competency response results for communication.]

- (0) N/A: This skill does not apply to my position.
- (1): I have no knowledge or skills.
- (2): I have awareness level knowledge or skills. (Basic level of mastery of the competency. Individuals may be able to identify the concept or skill but have limited ability to perform the skill.)
- (3): I have practical knowledge or skills. (Intermediate level of mastery of the competency. Individuals are able to apply and describe the skill.)
- (4): I have advanced knowledge or skills. (Advanced level of mastery of the competency. Individuals are able to synthesize, critique or teach the skill.)
FDOH Needs Assessment Survey

Part III: Perception of Competence Related to Public Health Preparedness and Response (PHPR)

- Survey item topics include the following:
  - Level of knowledge or skill of 4 PHPR Competencies
  - 3-6 survey items per competency
Part III: Perception of Competence Related to PHPR cont.

Example Competency Response results:

- [Diagram showing competency response results]

- (0) N/A This skill does not apply to my position.
- (1) I have no knowledge or skills.
- (2) I have awareness level knowledge or skills. (Basic level of mastery of the competency. Individuals may be able to identify the concept or skill but have limited ability to perform the skill)
- (3) I have practical knowledge or skills. (Intermediate level of mastery of the competency. Individuals are able to apply and describe the skill)
- (4) I have advanced knowledge or skills. (Advanced level of mastery of the competency. Individuals are able to synthesize, critique or teach the skill)
FDOH Needs Assessment Survey

Part IV: Capacity Technology and Business Development

- Survey item topics include the following:
  - Access to internet at work and at home
  - Level of computer skills
  - Time within or outside of work available for training and development participation
  - Learning style preference
Protect, promote and improve the health of all people in Florida.

FDOH Needs Assessment Survey

Part IV: Capacity Technology and Business Development cont.

- Example Competency Response results:

<table>
<thead>
<tr>
<th>Answer Options</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Computer based live training (Live meeting, Web-ex, etc)</td>
<td>49.9%</td>
<td>1822</td>
</tr>
<tr>
<td>Computer based self-paced online training</td>
<td>63.4%</td>
<td>2315</td>
</tr>
<tr>
<td>Hands-on training</td>
<td>83.6%</td>
<td>3052</td>
</tr>
<tr>
<td>Video conference training</td>
<td>37.9%</td>
<td>1384</td>
</tr>
<tr>
<td>Satellite broadcast training</td>
<td>26.0%</td>
<td>950</td>
</tr>
<tr>
<td>Face to face training (conferences, workshops)</td>
<td>80.6%</td>
<td>2941</td>
</tr>
<tr>
<td>Conference call training (audio only)</td>
<td>19.6%</td>
<td>715</td>
</tr>
</tbody>
</table>

9. What kind of training is best suited to your learning style? (Check all that apply)

- Preferred Delivery Method of Trainings:

- Computer based live training (Live meeting, Web-ex, etc): 49.9%
- Computer based self-paced online training: 63.4%
- Hands-on training: 83.6%
- Video conference training: 37.9%
- Satellite broadcast training: 26.0%
- Face to face training (conferences, workshops): 19.6%
- Conference call training (audio only): 19.6%
FDOH Needs Assessment Survey

Part V: Demographic Information

Survey item topics include the following:

- Gender
- Age
- Level of education
- Origin of birth
FDOH Needs Assessment Survey

Part VI: Public Health Matters

- 86 questions within six sections:
  - Local public health problems
  - Organizational public health challenges

### Table: Major Public Health Problems

<table>
<thead>
<tr>
<th>Answer Options</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Aging problems</td>
<td>41.6%</td>
<td>1489</td>
</tr>
<tr>
<td>2. Cancers</td>
<td>41.9%</td>
<td>1501</td>
</tr>
<tr>
<td>3. Child abuse/neglect</td>
<td>40.5%</td>
<td>1451</td>
</tr>
<tr>
<td>4. Dental problems</td>
<td>35.6%</td>
<td>1274</td>
</tr>
<tr>
<td>5. Diabetes</td>
<td>55.6%</td>
<td>1990</td>
</tr>
<tr>
<td>6. Domestic violence</td>
<td>34.9%</td>
<td>1248</td>
</tr>
<tr>
<td>7. Firearm-related injuries</td>
<td>10.6%</td>
<td>378</td>
</tr>
<tr>
<td>8. High blood pressure</td>
<td>48.8%</td>
<td>1746</td>
</tr>
<tr>
<td>9. HIV/AIDS</td>
<td>40.8%</td>
<td>1461</td>
</tr>
<tr>
<td>10. Homicide</td>
<td>13.1%</td>
<td>470</td>
</tr>
<tr>
<td>11. Infant death</td>
<td>15.8%</td>
<td>570</td>
</tr>
<tr>
<td>12. Infectious diseases (e.g. hepatitis, TB, etc.)</td>
<td>31.3%</td>
<td>1121</td>
</tr>
<tr>
<td>13. Mental health problems</td>
<td>41.0%</td>
<td>1468</td>
</tr>
<tr>
<td>14. Motor vehicle crash injuries</td>
<td>19.1%</td>
<td>684</td>
</tr>
<tr>
<td>15. Rape/Sexual assault</td>
<td>14.8%</td>
<td>529</td>
</tr>
<tr>
<td>16. Respiratory/Lung disease</td>
<td>17.5%</td>
<td>627</td>
</tr>
<tr>
<td>17. Sexually Transmitted Infections</td>
<td>49.8%</td>
<td>1782</td>
</tr>
<tr>
<td>18. Suicide</td>
<td>10.4%</td>
<td>372</td>
</tr>
<tr>
<td>19. Teen pregnancy</td>
<td>50.3%</td>
<td>1802</td>
</tr>
<tr>
<td>20. Other (specify)</td>
<td>12.3%</td>
<td>440</td>
</tr>
</tbody>
</table>

answered question: 3581
skipped question: 2058
Leadership Phone Interviews

- Target audience: 18 DOH Bureau/Division leaders and County Health Department Administrators
- Nine questions regarding perceived FDOH workforce challenges and opportunities
  - Recruitment, retention, and training topics
- 94% response rate
Acquired Data from Internal Resources

Leadership Online Survey

- Target audience: 27 mid-level managers and supervisors
- Nine questions similar to Leadership Phone Interviews
  - Recruitment, retention, and training topics
- 55% response rate
Process to Implement the Agency Workforce Development Plan

2. Conducted a Gap Analysis
   - Correspondent input
     - Needs Assessment Data from the Florida Public Health Training Centers
     - Responses from Leadership Phone Interviews and Online Survey
Process to Implement the Agency Workforce Development Plan

3. Created the Comprehensive Plan
   - WFD staff modified Plan recommendations from gap analysis
   - Draft Plan shared with Bureau Chiefs, executive management members, and other leadership members from Central Office and County Health Departments
   - Routed for approval by the State Surgeon General
3. Created the Comprehensive Plan cont.
   - Six goals
   - 18 strategies
   - Over 380 activities
   - Plan layout resource: Components of a WFD Plan
Process to Implement the Agency Workforce Development Plan

4. Developed the Implementation Plan
   - Provides specifications to Agency Workforce Development goals, strategies:
     - objectives
     - activity start and end dates
     - expected outcomes
     - performance measures
   - Resource: Implementation Plan Template
Next Steps

- Review Plan components and activities
  - Align with FDOH plans and strategies, such as the following:
    - State Health Improvement Plan
    - State Health Assessment Report
    - Agency Strategic Plan
- Continue to oversee and assess activity deliverables and outcomes
Lessons Learned

Workforce Needs Assessment

- Establish criteria that determine gaps between desired and current outputs
  - Quantifiable
  - Standards-driven
  - Resource-oriented
- Establish and apply marketing and communication strategy
  - Raise awareness
  - Encourage collaboration and buy-in
Lessons Learned

Agency WFD Plan

- Align Plan with organization mission, goals, strategies, and plans
- Consider the scope of activities initially developed
  - Validate goals, strategies, and activities
  - Ensure they reflect the concept of developing of your workforce
- Establish and apply communication strategy
  - Ensure systems are in place to meet workforce needs
For Further Information from Florida

For more information, contact the Florida Department of Health Office of Performance and Quality Improvement
Phone: 850-245-4007

Webinar speaker e-mails:
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Kimberly Facer, MS, Workforce Development Grant Coordinator: kimberly_facer@doh.state.fl.us
Protect and Promote Health

Prevent Disease and Injury

“To Protect and Promote Health of the Citizens of Oklahoma, to Prevent Disease and Injury, and to Assure the Conditions By Which Our Citizens Can be Healthy.”

Assure Conditions of Health

PHAB Domain 8: Maintain a Competent Public Health Workforce

ASTHO Accreditation Webinar Series
April 9, 2013
With a workforce of 2,100 employees, the Oklahoma State Department of Health, through its state office and system of local health services delivery, is ultimately responsible for protecting and improving the health status of Oklahoma citizens.

The Oklahoma public health system has 68 county health departments serving 77 counties and two independent city-county health departments serving Oklahoma City and Tulsa.

Medicaid, mental health, and environmental quality are administered by separate agencies.

Oklahoma has numerous partners including 66 Turning Point coalitions and 38 federally recognized Native American Tribes.
Human Resources Overview

- The Oklahoma State Department of Health is a merit-system employer with 1,490 classified (merit system) positions, 476 unclassified (nonmerit system) positions, and 137 temporary employees and student assistants.

- Human Resources has 27 positions. Of those 27 positions, 21 are filled. Human Resources is responsible for administration of a comprehensive human resources management system that includes:
  - Administrative Procedures
  - Alternative Dispute Mediation Program
  - Benefits
  - Employee Assistance Program
  - Grievance Management
  - Human Resources Administration
  - Occupational Health and Employee Wellness
  - Risk Management
  - Training and Employee Development
  - Workforce Planning, Recruitment, and Retention
Challenges

- The Oklahoma State Department of Health participated in a Public Health Accreditation Board (PHAB) Beta Test in June 2010.
- Overall, Human Resources received the lowest score among all the domains (68.75 percent).
- Numerous areas were identified as needing improvement.
- PHAB Standards were modified following the Beta test.
Standard 8.1

- 8.1 Encourage the development of a sufficient number of qualified public health workers.

- Measure 8.1.1. Establish relationships and/or collaborate with the schools of public health and/or other related academic programs that promote the development of future public health workers.

- Documentation Utilized:
  - ✓ Student Internship Program Participation Agreements
Standard 8.2

- 8.2 Assess staff competencies and address gaps by enabling organizational and individual training development opportunities.

- Measure 8.2.1 Maintain, implement, and assess the health department workforce development plan that addresses the training needs of the staff and the development of core competencies.

- Documentation Utilized:
  - Agency-Wide Competency Based Training Needs Assessment
  - Workforce Development Plan
  - Training opportunities related to findings of needs assessment
  - Training announcements, copies of curricula, and training participant rosters
Needs Assessment

Agency-Wide Competency Based Training Needs Assessment
Leadership Effectiveness Framework Competencies

SUPERVISORS
FIRST-LEVEL COMPETENCIES:
Managing Diverse Workforce
Conflict Mgmt.
Team Building
Influencing/Negotiating
Human Resources Mgmt.

MANAGERS
MID-LEVEL COMPETENCIES:
Creative Thinking
Planning & Evaluating
Customer Orientation
Mgmt. Controls/Integrity
Financial Mgmt.
Technology Mgmt.

EXECUTIVES
HIGHER-LEVEL COMPETENCIES
Vision
External Awareness

MID-LEVEL COMPETENCIES
FIRST-LEVEL COMPETENCIES

BASIC COMPETENCIES:
Oral Communication
Written Communication
Problem Solving
Leadership
Interpersonal Skills
Self-Direction
Flexibility
Decisiveness
Technical Competence
Workforce Development Plan

- Utilize a competency-based needs assessment.
- Ensure all levels of the organization are represented.
- Link delivery of training to gaps identified by the needs assessment.
- Include short- and long-term goals with action steps for completion.
- Ensure training curricula identify competencies addressed.
Workforce Development Model

OKLAHOMA STATE DEPARTMENT OF HEALTH
WORKFORCE DEVELOPMENT MODEL

ONBOARDING
First Year of Employment with Supervisor and Assigned Mentor

EMPLOYEE ORIENTATION
Vision, Mission, Values, 12 Ethical Practices/10 Essential Services, Organizational Overview, Presented by Senior Leadership Workforce Hot Topics

Leadership Effectiveness Framework
BASIC COMPETENCIES
Decisiveness, Flexibility, Interpersonal Skills, Leadership, Oral Communication, Problem Solving, Self-Directed, Technical Competence, Written Communication
EXAMPLE TRAINING OPPORTUNITIES:
– Creative Problem Solving
– Applied Leadership

Leadership Effectiveness Framework
SUPERVISING COMPETENCIES
Basic Competencies +
Conflict Management, HR Management, Influencing/Negotiating, Managing Diverse Workforce, Team Building
EXAMPLE TRAINING OPPORTUNITIES:
– Cultural Competence
– Managing Conflict
– Team Building

Leadership Effectiveness Framework
MANAGERIAL COMPETENCIES
Basic Competencies + Supervisory Competencies +
Creative Thinking, Planning and Evaluating, Customer Orientation, Management Controls/Integrity, Financial Management, Technology Management
EXAMPLE TRAINING OPPORTUNITIES:
– Oklahoma Public Health Leadership Institute
– Quarterly Leadership Training
– Advanced Creative Problem Solving

Leadership Executive Framework
EXECUTIVE COMPETENCIES
Basic Competencies + Supervisory Competencies +
Building Coalitions/Communications, Business Acumen, Leading Change, Leading People
EXAMPLE TRAINING OPPORTUNITIES:
– Governor’s Executive Development Program
– Quarterly Leadership Training

PUBLIC HEALTH TIER 1 CORE COMPETENCIES
Tier 1 competencies typically apply to entry level public health professionals that have limited experience in public health and are not in management positions.
Analytical/Assessment Skills ~ Communication Skills ~ Community Dimensions of Practice Skills ~ Cultural Competency Skills ~ Financial Planning and Management Skills ~ Leadership and Systems Thinking Skills ~ Policy Development/Program Planning Skills ~ Public Health Sciences Skills
EXAMPLE TRAINING OPPORTUNITIES:
– Cultural Competency
– Communicating Effectively
– Administrative Law
– Other Public Health Courses Available Via OK-Train

PUBLIC HEALTH TIER 2 CORE COMPETENCIES
Tier 2 competencies typically apply to employees with management and/or supervisory responsibilities.
Analytical/Assessment Skills ~ Communication Skills ~ Community Dimensions of Practice Skills ~ Cultural Competency Skills ~ Financial Planning and Management Skills ~ Leadership and Systems Thinking Skills ~ Policy Development/Program Planning Skills ~ Public Health Sciences Skills
EXAMPLE TRAINING OPPORTUNITIES:
– Listening Skills for Managers
– Writing Skills for Managers
– Other Public Health Courses Available Via OK-Train

PUBLIC HEALTH TIER 3 CORE COMPETENCIES
Tier 3 competencies typically apply to senior managers and/or leaders of public health organizations.
Analytical/Assessment Skills ~ Communication Skills ~ Community Dimensions of Practice Skills ~ Cultural Competency Skills ~ Financial Planning and Management Skills ~ Leadership and Systems Thinking Skills ~ Policy Development/Program Planning Skills ~ Public Health Sciences Skills
EXAMPLE TRAINING OPPORTUNITIES:
– Systems Thinking
– Applied Leadership
– Other Public Health Courses Available Via OK-Train

ANNUAL MANDATORY TRAINING
Cultural Competency ~ Ethics ~ Safety ~ HIPAA ~ Blood Borne Pathogens ~ IT Security Practices

PERFORMANCE MANAGEMENT PROCESS ~ INDIVIDUAL DEVELOPMENT PLANS
SELECTION AND HIRING PROCESS ~ KNOWLEDGE, SKILLS, ABILITIES, COMPETENCIES, EDUCATION AND EXPERIENCE
Workforce Development Plan

- Incorporate competency development into existing processes (hiring and selection, performance management, etc.).
- Address succession planning/career pathing.
- Incorporate a process for continuous improvement going forward.
- Demonstrate how the plan is operationalized.
8.2 Assess staff competencies and address gaps by enabling organizational and individual training development opportunities.

Measure 8.2.2 Provide leadership and management development activities.

Documentation Utilized:
✓ Governor’s Executive Development Program for State Officials
✓ Learning and Education Assistance Program Administrative Procedure
✓ Reimbursement Agreement
✓ Kansas, Missouri, and Oklahoma Regional Leadership Institute
✓ Oklahoma Public Health Leadership Institute
Standard 8.2

- 8.2 Assess staff competencies and address gaps by enabling organizational and individual training development opportunities.

- Measure 8.2.3 Provide consultation and/or technical assistance to Tribal and local health departments regarding evidence-based and/or promising practices in the development of workforce capacity, training, and continuing education.

- Documentation Utilized:
  - “Preparing for the 7th Generation: Preventing and Treating Commercial Tobacco Dependence”
  - “Communicable Disease Nurse Video Conference”
Lessons Learned

- Don’t be afraid to share information about innovative workforce development initiatives if the opportunity presents itself to do so.

- Be able to “connect the dots” beginning with a needs assessment, gap identification, and delivery of courses to address gaps identified at all levels of the organization.

- Build accreditation requirements into agency policies, procedures, and practices whenever possible.

- Ensure documentation clearly demonstrates the standard.

- Change is difficult but rewarding.
For Further information from Oklahoma

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Oklahoma City, Oklahoma
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DebbieBo@health.ok.gov
Open up the lines for Q&A!
THANK YOU!

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