The new public health core: Matching workforce needs to academic training

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Workshop Objectives

• Provide support and assistance to those implementing new accreditation curricular requirements in health education and other public health programs (Area III)

• Communicate findings of multiple efforts to design workplace-relevant public health curriculum to partners and stakeholders (Area IV)

• Conduct health education program quality assurance and process improvement (Area V)
Where have we been?
Where are we going?
And what is our evidence?
First... some "ancient" history

- “Somewhat isolated from the field of public health practice” – 1988
- Universal competencies – Faculty/Agency Forum – 1992
- Reaffirmed “core” but names 8 additional areas for competency to address future concerns - 2003
Workforce research - skills

• Defining skills needed for public health leadership (findings are consistent):
  • Systems-thinking
  • Communication in written and oral form to various audiences
  • Change dynamics and management
  • Facilitation, negotiation and team and group dynamics
  • Financial management
  • Human resources management
  • Cultural competency
  • Political analysis and advocacy

Workforce research - content

- Defining content needed for public health leadership
  - Tools of social analysis including population sampling & surveys and program evaluation
  - Health and disease in populations including epidemiology and disease transmission and effects of environment on human health
  - Health promotion and disease prevention including health education and behavior modification
  - Health systems and how they work

(Roemer, 1988; IOM, 2003; Calhoun, McElligott, Weist & Raczynski, 2012)
What didn’t the research find?

And then a deep dive into one of these areas...
Framing the Future

A MASTER OF PUBLIC HEALTH DEGREE FOR THE 21ST CENTURY

KEY CONSIDERATIONS
- DESIGN FEATURES
- CRITICAL CONTENT OF THE CORE

FINAL REPORT 1/9/14
Employer Interviews - 2013

- Problem solving
- How the health system works
- Leadership, management and teamwork
- Global health
- Policy
- Analytic methods – understanding and applying data to make decisions
- Technology and information
- Budgeting and finance
- Communication

Public Health Trends and Redesigned Education: Blue Ribbon Public Health Employers Advisory Board
Thought Leader Interviews - 2014

- Systems thinking
- Change management
- Communication
- Data integration
- Nimble in responding to rapidly changing health and health care environment

(Miner & Allan, 2014)
Council on Linkages - 2014

• 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
• System thinking and leadership skills

The Council on Linkages Between Academia and Public Health Practice
PH WINS Data - 2015

Top 3 Training Needs
• Influencing policy development
• Understanding relationship between a new policy and an array of health problems
• Assessing factors that influence health problems

3 Most Important Skills
• Gathering reliable information
• Communicating with different audiences
• Persuading others to act

Competency Gaps
• Policy analysis and development
• Business and financial management
• Systems thinking and social determinants of health
• Evidence-based public health practice
• Collaborating with and engaging diverse communities  (Sellers, et al., 2015)
NBPHE – Job Task Analysis - 2015

- **Program Planning**
  1. Program Planning
  2. Program Implementation
  3. Program Evaluation

- **Management, Finance & Policy**
  4. Fiscal Resource Management
  5. Process improvement

- **Critical/Strategic Analysis**
  6. Data collection and analysis
  7. Strategic analysis
  8. Community health planning

- **Leadership & Systems Thinking**
  9. Team Building
  10. Strategic Management

- **Communication**
  11. Communication

- **Ethics**
  12. Ethical Action

- **Biological & Environmental Applications**
  13. Risk Factor Assessment

- **Advocacy**
  14. Health policy development and management

- **Diversity & Cultural Proficiency**
  15. Cultural competency

- **Collaborating & Partnering**
  16. Collaborative Action
<table>
<thead>
<tr>
<th>CEPH Draft Competencies</th>
<th>Council on Linkages</th>
<th>FTF Employers’ Panel</th>
<th>FTF MPH Report</th>
<th>NBPHE JTA</th>
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</thead>
<tbody>
<tr>
<td>Evidence-Based Approaches to Public Health</td>
<td>Analytical/Assessment Skills</td>
<td>Analytic Methods, Technology and Information</td>
<td>Data Collection, Analysis, Interpretation, Evidence-Based Reasoning</td>
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<tr>
<td>Communication</td>
<td>Communication Skills</td>
<td>Communications</td>
<td>PH-Specific Communication</td>
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<tr>
<td>(Dispersed throughout competencies)</td>
<td>Cultural Competency</td>
<td>Cultural Contexts &amp; Respectful Engagement</td>
<td>Diversity and Cultural Proficiency</td>
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<tr>
<td>Policy in Public Health</td>
<td>Policy Development</td>
<td>Policy</td>
<td>Legal, Ethical, Other Dimensions of Policy</td>
<td>Advocacy</td>
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<td>Systems Thinking</td>
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<td>Program Planning &amp; Management</td>
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<td>Budgeting and Finance, Management</td>
<td>Project Management &amp; Implementation</td>
<td>Program Planning, Management, Finance</td>
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<td>Public Health &amp; Health Care Systems</td>
<td>Community Dimensions of Practice Skills</td>
<td>How the Health System Works, Global Health</td>
<td>US &amp; Global Health Care Systems</td>
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<td>Leadership</td>
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<td>Interprofessional Practice</td>
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<td>• Problem Solving</td>
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<td>• Biological, Social, Economic, etc. Determinants</td>
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<td>• History &amp; Philosophy of PH</td>
<td>• Critical / Strategic Analysis</td>
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<td>• Population Health Concepts &amp; Tools</td>
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<td>• Health Promotion</td>
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"You have brains in your head and feet in your shoes, you can steer yourself in any direction you choose!"

--Dr. Seuss
Criteria Revisions: Where are we?
CEPH landscape

• 3 accreditation categories, sets of criteria

• Regular revision = good accreditation practice
SBP Criteria

• Leadership, Management & Governance
• Resources
• Faculty Qualifications
• Curriculum
• Program Effectiveness
• Advising
• Diversity
• Distance Education
SBP Curriculum

- General UG curriculum
- Public health major
- Public health skills
- Cumulative & experiential activities
- Cross-cutting concepts
Revising SPH & PHP criteria

• Staff & Council tracking issues, concerns, feedback over last 10 years
Major goals/priorities

- Simplification
- Quality
- Flexibility/Innovation

Simplification

Quality

Flexibility/Innovation

CEPH - Council on Education for Public Health
2014
- Discussions begin in Council
- Web survey to stakeholders
- Technical Assistance Session with Q & A

2015
- Released curricular criteria for comment (Feb)
- Web-based & in-person presentations to groups, listening sessions, Q & A
- Considered Round 1 comments on curriculum
- Released full draft for comment (Nov)
- Employer Panel at APHA (Nov)

2016
- Considered Round 2 comments (Jan)
- Released revised full draft for comment (Feb)
- Consider Round 3 comments (June)
- Release updated draft for comment (July)
- Consider Round 4 comments (October)
- Adopt final criteria & implementation plan (release in November)
Next steps

• Comments on round 3 due to CEPH by COB on May 16
• Stay tuned in early July for next draft!
• Next comment period in summer to early fall—likely due date in mid- to late September

• Anticipated release of criteria & implementation plan in late Oct – early Nov
  • Implementation plan will explain what you need to do & by when
  • Past experience suggests 1st SVs with new criteria will be in 2018, but nothing decided yet!
<table>
<thead>
<tr>
<th>New criterion</th>
<th>Relationship to current criteria</th>
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<tbody>
<tr>
<td>Introduction</td>
<td>Replaces elements of Criterion 1.3</td>
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<tr>
<td>A Organization &amp; Decision Making</td>
<td>Replaces 1.4 &amp; 1.5. Contains elements of 1.3</td>
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<tr>
<td>B Mission &amp; Evaluation</td>
<td>Replaces 1.1 &amp; 1.2. Contains elements of 2.7</td>
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<tr>
<td>C Resources</td>
<td>Replaces 1.6 &amp; 1.7</td>
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<tr>
<td>D Curriculum</td>
<td>Replaces 2.1-2.14</td>
</tr>
<tr>
<td>E Faculty</td>
<td>Replaces 3.1, 4.1 &amp; 4.2. Contains elements of 3.2.</td>
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<tr>
<td>F Community Engagement</td>
<td>New: contains elements of the following: 1.1, 1.2, 1.8, 2.7 &amp; 3.2</td>
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<tr>
<td></td>
<td>Replaces 3.3</td>
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<tr>
<td>G Diversity</td>
<td>Replaces 1.8</td>
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<tr>
<td>H Student Services</td>
<td>Replaces 4.3 &amp; 4.4</td>
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</table>
Proposed curriculum: first draft

Today: 2011 criteria

5 core areas
Core competencies

Draft 1

Foundational skills
Foundational content
Professional disposition

Concentration competencies

Concentration competencies

Practical Skills

Applied experience

Culminating Experience

Integrative experience
Skills

• Plan a population-based project, program or intervention, including defining populations and assessing and prioritizing their needs

• Develop a grant proposal for a public health project, program or intervention, including developing a budget

• Implement a population-based project, program or intervention, including addressing management and human resource concerns

• Manage grant funding, including required reporting

• Evaluate the success of a population-based project, program or intervention

• Use continuous quality improvement principles
Content

• History of public health, including evolution of the health system and its medical care and public health components

• Core functions of public health and the 10 Essential Services

• Principles of team development and roles and practices of effective teams

• Roles and responsibilities of other health-related professionals and the relationships between various health-related professions

• Concepts of surveillance, screening, immunity and risk factors

• Population-based study design
Professional disposition

• Advancing the profession of PH
• Applying ethical principles to practice
• Excellence in ongoing professional development
• Serving the public good
Proposed curriculum: draft 2

- Foundational skills
- Foundational content
- Professional disposition

- Concentration competencies

- Applied experience

- Integrative experience

- Foundational competencies
  - 37 for MPH
  - 43 for DrPH

- Concentration competencies

- Application & practice

- Integrative learning experience
Competencies

• Plan a population-based project, program or intervention, including defining populations and assessing and prioritizing their needs

• Develop a grant proposal for a public health project, program or intervention, including developing a budget

• Implement a population-based project, program or intervention, including addressing management and human resource concerns

• Manage grant funding, including required reporting

• Evaluate the success of a population-based project, program or intervention

• Use continuous quality improvement principles
SURVEY SAYS....

...NO
Proposed curriculum: draft 3

- Foundational PH knowledge (14 items)
- Foundational competencies
  - 20 MPH
  - 17 DrPH
- Concentration-specific competencies
- Applied practice experience
- Integrative learning experience
Foundational PH knowledge

- Profession & science of public health
- Factors related to human health
- Validated through variety of methods
MPH foundational competencies

• Apply awareness of cultural values and practices to the design or implementation of public health programs

• Design a population-based project, program or intervention, including defining populations, assessing and prioritizing their needs, selecting appropriate frameworks and identifying and managing available resources

• Explain basic principles of resource management including human, fiscal and material

• Select program evaluation methods
Concentration competencies

- Chosen by the program
- Minimum of 5
Applied practice experience
Integrative learning experience

- High-quality written product
- Synthesis of foundational & concentration competencies
Non-curricular changes

- Redefinition of SPH requirements
  - 3 MPH
  - 2 doctoral
- Changes in methods of “counting” faculty resources
- Vastly reduced reporting burden in research, service, etc.
Other good news on round 3...

• Consensus achieved on many areas

• Identified priority areas for continuing discussion
  • Curricula (except bacc)
  • Evaluation & outcomes
  • Faculty resources

• All criteria open for comment in round 3, though priority areas are intended focus
### Heightened attention to assessment

#### Assessment of Competencies for MPH in X Concentration

<table>
<thead>
<tr>
<th>Competency</th>
<th>* Course number(s) or other educational requirements</th>
<th>Specific assessment opportunity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Choose data collection methods</td>
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<tr>
<td>2. Interpret data analysis</td>
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<td>3. Analyze quantitative and qualitative data</td>
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<tr>
<td>4. Integrate evidence, including identifying appropriate data sources and using informatics, to describe a public health issue</td>
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<td>5. Apply epidemiological methods appropriate for population-based inquiry</td>
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*Your turn!*
Keep the excellent comments coming!

http://ceph.org/criteria-revision/