Association of State and Territorial Health Officials

Town Hall Meeting: Core Competencies for Public Health Professionals

February 4, 2021

Rough Notes

Your feedback needed!

- What changes are occurring in the practice of public health that should be considered in the revision process?
- What are your reactions to what we're hearing/thinking so far (alignment with revised EPHS, skills needed for Public Health 3.0, social determinants of health, health equity, social justice, administrative and management skills, COVID-19, how to interpret and use the Core Competencies)?
- Are there specific concepts or competencies that are missing from the Core Competencies?
- What changes would you NOT like to see?
- What else should we know?

Feedback

- More levels additional tiers
 - Think we need more "levels" what is needed for direct service type public health professions (public health nurses, community health workers, health inspectors) in Tiers I & II are quite different than other staff. A shorter list for administrative staff (financial staff, administrative assistants, etc.) might be useful. Do have staff who don't think these competencies are relevant to them.
- Tiers are not as useful because they are very repetitive there are a lot of competencies that cross all tiers
 - Might make sense to have a general section and then an "in addition" type of section
 - Tier 1 encompasses a whole bunch of people new professionals, administrative assistants, nurses
 - Want administrative assistants to have some kind of knowledge in public health
 - Would be helpful to have 'this is why it applies to you and is important' piece
- Word "tiers" calling them tiers is sort of antithetical to what we do in public health –
 don't like the idea of saying something is higher than something else when they are
 really different bundles of skills
- Thought additional tiers would be good at first, but then was thinking about how in public health, ideally folks would be cross-trained in all competencies regardless of their job, because, as we all know, things change rapidly in public health and the more versatile our workforce, the more easily it is to move people around as needed
 - Possibly a clinical tier and a non-clinical would make sense

- I wonder how the framing of these [tiers?] can better answer questions about having a specific knowledge base versus the competencies
- In our State Health Department, we find the tiers useful in the development of assessment and training
- Reimbursement and compensation and how that correlates with these skills
 - In hiring, may hire someone with extensive degrees and experience at the same level as a new graduate because one person's skills are not different according to the job description
 - Need to correlate compensation with these skills
 - Not compensated well in public health
 - Discussions may increase as we are looking at reinfusing the workforce with new funding – looking at all these things together, not in silos
 - Like comments about tiers and the compensatory limitations
- Practicum in collaboration most valuable piece of graduate school
- See silos in agency people in many different parts are working on the same problems, but do not have skills of sharing and working across
 - Skill of effectively collaborating
- Mentorship one of core responsibilities as a manager and leader in public health would like to see that in Core Competencies – as you move up the ladder, there's an increasing role for mentoring young leaders
- Some staff don't understand how the Core Competencies apply to them
- One challenge feel like have a lot of people who feel like they have a specialty in an area of public health as an subject matter expert or a type of work (epidemiologist vs. educator) the Core Competencies don't get into that tiers are more management than type of work disciplines have their own set of competencies, how do these integrate with that
- A lot of the Core Competencies are very technical in nature so much of public health is driven on soft skills – use state civil service competencies and those work well because focus on soft skills – creativity, judgement, social awareness, strategic thinking, conflict management
 - Attitudes
 - Public Health Code of Ethics could make it easier to find from the Core Competencies – should work alongside the competencies
 - Recognizing biases
- Radiation program, health inspection program have fairly specialized set of skills and knowledge – but these are core competencies – maybe being more explicit that "core competencies" doesn't mean everything
 - When people say to align training with core competencies and then include something that's not in the Core Competencies and think they can't because it's not on the list
 - Training could be important for that
- Visual to show what the 8 domains are or a quick snapshot/one pager of what's in the Core Competencies – hard to digest – give people something easy and they can then dig deeper

- Make one list of competencies with verbs can swap out Mad Libs style
- While individual workforce development plans are the ideal, our capacity has not allowed that
 - We are able to use the competencies when planning group trainings with our local health departments
- Are the new 10 Essential Services included in the version you have online? If not, will that be updated?
- Addressing resistance to public health recommendations between mask refusal and vaccine fears, this seems like an issue that we could address in the competencies. We need training on how to address public concerns about broad public health recommendations. Think this issue crosses specialty areas.
 - This goes beyond communications. We are accustomed to addressing resistance with science, but we need to develop skills to understand what causes people to fear the changes and address those fears in a positive, reassuring way.
- Wouldn't matter if changed the domains
- Appreciate it being aligned with 10 Essential Public Health Services and Public Health Accreditation Board accreditation

Questions? Additional feedback?

Information about the revision of the Core Competencies for Public Health Professionals can be found at https://www.phf.org/competenciesrevision.

Questions or comments can be shared with Kathleen Amos at kamos@phf.org.