



# **WORKFORCE DEVELOPMENT**

## **FACILITATION GUIDE FOR SMALL HEALTH DEPARTMENTS**



**MONTANA**  
PUBLIC HEALTH INSTITUTE

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## **PURPOSE:**

- This Workforce Development Facilitation Guide for Small Health Departments aims to facilitate the creation of health department-specific competencies for local and tribal health departments in Montana and aids in the creation of a tailored and actionable workforce development plan.
- This guide also seeks to offer an approach to workforce development that centers health department's Community Health Assessments, Community Health Improvement Plans, Strategic Plans, as well as work towards achievement of Public Health 3.0.
- This guide was developed by the Montana Public Health Institute, in partnership with the Montana Department of Public Health & Human Services Public Health System Improvement Office and the Rocky Mountain Public Health Training Center.

## **INTENDED AUDIENCE:**

- Small, rural health departments
- Public health support organizations (associations, public health institutes, training centers, academia, etc.)

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# BACKGROUND

The Montana Public Health Institute (MTPHI) and the Montana Department of Public Health and Human Services (DPHHS) Public Health System Improvement Office (PHSIO) are collaborating on the Pathways Learning Collaborative in an effort to strengthen local and tribal health department capacity and prepare Montana health departments for pursuing Pathways Recognition through the Public Health Accreditation Board. The inaugural cohort of the Montana Pathways Learning Collaborative began in early 2023 and consists of five local and one tribal health department. Across these six health departments, workforce development (Domain 8) was identified as an area of opportunity.

In April 2023, the participating health departments, MTPHI, and the PHSIO met to discuss Pathways Measure 8.2.1, which describes the requirements of a workforce development plan. According to Version 2022 of the Standards & Measures, the purpose of Measure 8.2.1 is to assess the health department's workforce development plan to ensure that it "assesses the workforce's ability to maintain core public health activities, equity focused and administrative capabilities and identifies strategies to improve the workforce."

The discussion also focused on assessment tools and methodologies that PHAB recommends and the potential limitations that these have for rural health departments. Specifically, there was concern raised about the length of the assessments, how to use the results as a small health department, how to get sufficient staff participation / understanding in the process, and how this work could help prepare health departments for their role in the Community Health Improvement Plan activities and in becoming a Community Health Strategist or working towards Public Health 3.0 (which participants felt was not covered in the Core Competencies). In summary, the participating health departments posed the following question to MTPHI and the PHSIO:

## How do we create a workforce development assessment that will:

- Make sense in the context of small / rural health departments
- Narrow potential areas of focus for workforce development (in alignment with available resources and staff availability)
- Assess the health department's capacity to meet / implement the foundation capabilities AND provide opportunities to strengthen the provision of foundational public health services (including the health department's role in their CHA and CHIP which may require some new strategic skills)
- Provide results that guide staff in the creation of their own personal learning goals (Pathways Measure 8.2.2)
- Take advantage of all the learning opportunities currently available in Montana, regionally, and nationwide

In May 2023, MTPHI and the PHSIO organized an in-person meeting with the Montana Pathways Learning Collaborative health departments and Sarah Davis, Associate Director of the Rocky Mountain Public Health Training Center (RM-PHTC) to discuss workforce development. The RM-PHTC is engaged in ongoing work with the [Public Health Learning Agenda for Systems Change](#) (a national effort of the Public Health Training Center Network) and Sarah brought forward the idea of using Community Health Assessments and Community Health Improvements Plans to facilitate workforce development in an effort to create a more meaningful and actionable plan for health departments, including in small, rural, and tribal communities.

# PUBLIC HEALTH LEARNING AGENDA FOR SYSTEMS CHANGE

The Public Health Learning Agenda for Systems Change was developed to focus learning efforts on addressing the complex challenges affecting public health. To effectively address health inequities, we must move beyond actions solely focused on individual behavior change; recognize the historical and environmental context in which individuals live; and shift our own mental models about what is causing the problem. Meanwhile, public health's current approaches to workforce development are insufficient to address today's complex challenges and inequities. Multiple reports released over the last decade articulate that the U.S. public health workforce needs to take a more community-engaged, multi-sectoral, systems-thinking approach to our work that address the root causes of community challenges.



The process of developing a plan for learning that would lead to the significant, systemic changes needed to impact complex community challenges includes:

1. Identifying and defining the community challenge. This includes an in-depth exploration of the root causes underlying the challenge.
2. Setting a vision to articulate the change you are trying to achieve.
3. Creating a learning plan that answers the questions:
  - a. What kinds of changes to policies and practices would be needed to bring about the desired vision?
  - b. What knowledge and skills would be needed to bring about those policy and practice changes?

Commonly, health departments' Workforce Development Plans are developed separate from and are disconnected to the Community Health Assessments. The Learning Agenda for Systems Change provides a guide for how to connect these two essential documents. Community Health Assessments identify priority issues that impact the community's health, such as behavioral health, lack of affordable housing, unemployment or under-employment, and access to health care in rural areas. Workforce Development Plans can, and should, serve as a tool for defining the skills, knowledge, and trainings that the public health workforce needs in order to effectively and efficiently address priority issues.



# WORKFORCE DEVELOPMENT FOR THE PATHWAYS LEARNING COLLABORATIVE

During the May 2023 Pathways Learning Collaborative in-person meeting, Sarah facilitated an exercise focused on behavioral health as a community challenge as a launching point for workforce development planning. Behavioral health was selected because it commonly appears as a CHA / CHIP priority area for local and tribal health departments in Montana. During the exercise, participants explored the question: **“what would our staff need to know or be able to do in order to address the challenges or priorities identified in our CHA / CHIP?”**

Following the May 2023 meeting, MTPHI and the PHSIO met with each participating health department to determine appropriate next steps. Some of the health departments were ready to demo a larger scale version (i.e., using their entire CHA, CHIP, strategic plan, etc.) of the exercise that Sarah led, while others wanted to finalize their CHA, CHIP, and / or strategic plan before starting workforce development. The following document provides MTPHI’s outline of a process to facilitate the development of health-department specific competencies to be used in workforce development assessment and planning efforts in small / rural health departments in Montana.

# PHAB PATHWAYS RECOGNITION MEASURE

## 8.2.1

According to [Version 2022 of PHAB’s Standards & Measures for Pathways Recognition](#), the purpose of Measure 8.2.1 is to ensure the health department’s workforce development plan includes an assessment of the workforce’s ability to maintain core public health, equity-focused, and administrative capabilities, as well as outlines strategies to improve the workforce. Specific requirements for this measure include:

<b>Required Element:</b>	<b>Description:</b>
<b>RE A</b>	A description of the current capacity of the health department both as a whole and within its sub-units.
<b>RE B</b>	An organization-wide assessment of current staff capabilities against an accepted set of core competencies.
<b>RE C</b>	Findings from an equity assessment that considers staff competence in the areas of cultural humility, diversity, or inclusion.
<b>RE D</b>	Priority gaps identified with an explanation of the prioritization. At least one of the prioritized gaps must relate to the findings of the assessments in required element a, b, or c.
<b>RE E</b>	Plans to address at a minimum two of the gaps in required element d; for each gap, documentation must include: (1) measurable objectives and (2) improvement strategies or activities with timeframes.



Based on these requirements, MTPHI and the PHSIO propose the following activities in order to facilitate workforce development planning in small / rural health departments:

<b>Pre-work</b>	<p>Describe the health department’s current staffing and capacity (RE A). This activity can be completed by the health department’s director, managers, or others as appropriate. Include information about which programs are currently offered, how those programs are staffed, as well as workforce demographics.</p> <p>In addition, utilize the <a href="#">Public Health Workforce Calculator</a> to assess the health department’s current and projected capacity. and include this information / screenshots in your description.</p>
<b>Step 1</b>	<p>Facilitate the creation of an internally developed set of competencies with health department staff. The competencies will be identified through consideration of the CHA / CHIP, current programs and services, and the strategic plan. In addition, the competencies will draw from existing competency sets (e.g., Core Competencies, Strategic Skills, etc.).</p>
<b>Step 2</b>	<p>Develop and disseminate an assessment to measure health department staff capabilities against the internally developed set of competencies from Step 1 (RE B). If the health department does not identify a competency related to health equity, promote using the <a href="#">Health Equity at Work survey</a> (RE C) to assess and identify specific opportunities related to advancing equity.</p>
<b>Step 3</b>	<p>Based on the assessment results, select at least two priority areas to focus on to include in the workforce development plan, including measurable objectives and improvement strategies with timeframes (RE D &amp; E). As part of this prioritization process, consider any gaps identified in the assessment results, as well as staff training interests / requests. When writing the workforce development plan, be sure to include a description of the prioritization process used and how the selected priority areas (and the associated objectives) address any gaps or other findings from the assessment.</p>

# FACILITATION GUIDE

## OUTCOMES:

1. Creation of a set of internally developed competencies for small / rural health departments that prioritizes the specific competencies and skills needed for the biggest impact on priorities identified in the CHA, CHIP, strategic plan, etc.
2. A tailored assessment tool based on health department-specific competencies.
3. A workforce development plan that is responsive to CHAs, CHIPs, SPs, and other work being done by health departments.

## PRE-WORK: PUBLIC HEALTH WORKFORCE CALCULATOR

Prior to developing a set of health department-specific competencies, it can be helpful to think about the health department's current and future workforce. Required Element A of Measure 8.2.1 asks for a description of the health department's current staffing and capacity. This activity can be completed by the health department director, program managers, or others as appropriate. Include information about which programs are currently offered, how those programs are staffed, as well as workforce demographics. See the Workforce Development Plan template in the appendices for suggested data and formatting.

In addition, the health department can utilize tools like the [Public Health Workforce Calculator](#) to assess the health department's current and projected capacity. The Public Health Workforce Calculator can help health departments estimate the number of full-time equivalents needed to ensure the provision of the Foundational Public Health Services in their jurisdiction. Use the results of the workforce calculator to discuss current and future workforce needs related to your health department, including areas that might need additional training or support. Include discussion points and other relevant information (e.g., screenshots of your health department's calculator results) in your workforce development plan.

# STEP 1: DEVELOP A SET OF HEALTH DEPARTMENT SPECIFIC COMPETENCIES

Required Element B of Measure 8.2.1 allows health departments to create a set of internally developed competencies that can be used to assess staff. Developing health department-specific competencies allows health departments to narrow their focus and ensure they are including all relevant components of their role in the community, including their CHA / CHIP work, Strategic Plan, and their push towards Public Health 3.0.

To determine the health department-specific competencies (also referred to as internally developed competencies), MTPHI proposes a facilitated session with health department (HD) staff that considers the CHA / CHIP, the health department's programs and services, and the health department's strategic plan and / or their push towards Public Health 3.0. The facilitated session should include all staff at the health department to ensure comprehensive consideration of the health department's work. In addition, it may be helpful to assign health department staff with pre-work or "homework" prior to participating in the session. This can help ensure a baseline understanding of workforce development, as well as the health department's most recent CHA, CHIP, and Strategic Plan. Refer to the Workforce Development Meeting Pre-Work in the appendices for a suggested outline of what this could look like.

The in-person workforce development meeting will consist of three sections: the CHA / CHIP, the health department's programs and services, and the Strategic Plan / Public Health 3.0. For each of these three sections, the facilitator should begin by asking health department staff to brainstorm a list of the underlying / root causes associated with the public health challenges that the health department is trying to address (e.g., use flip chart paper to take note of the brainstormed ideas). Once root causes have been identified, the facilitator will ask health department staff to brainstorm what skills are needed in order to effectively and efficiently address the root causes (e.g., use sticky notes so that participants can brainstorm individually and then recap as a group).

Complete this exercise for each of the three areas (see Facilitated Session Questions below for a recap). Once all ideas have been noted, start to group similar themes across the three areas. These themes will comprise the internally-developed competencies, as well as the provide sample language from the health department staff on how these areas are defined. Other public health competency sets (e.g., the Core Competencies or the Strategic Skills) can be referenced during this step to assist with finding language to describe the brainstormed competency areas.

## FACILITATED SESSION QUESTIONS:

1. Community-Focused (CHA / CHIP)
  - a. CHA / CHIP: what role does the health department play? What are the specific areas where the HD has been identified as a leader / convener?
    - i. What is the priority / goal? What is the community challenge?
      1. What are the root causes contributing to this challenge?
    - ii. What skills do you need to do this?
2. Health Department-Focused (Programs and Services)
  - a. Thinking about your HD's programs / services, what are the priority areas? E.g., what are the biggest needs from your community / what gap is the health department currently filling or could be filling? What things do you want to improve about your HD / program?
    - i. What is the priority / goal?
    - ii. What skills do you need to do this?
3. Organization-Focused (Strategic Plan)
  - a. As an organization, are there overarching areas that you see as a priority?
    - i. What is the priority / goal?
    - ii. What skills do you need to do this?
  - b. If the HD doesn't have a strategic plan or the plan is not up-to-date, consider the recommendations to achieve Public Health 3.0 (e.g., strong leadership and workforce; strategic partnerships; flexible and sustainable funding; timely and locally relevant data, metrics, and analysis; and foundational infrastructure):
    - i. Across these areas, are there actions the HD would like to take?
      1. What is the priority / goal?
      2. What skills do you need to do this?
4. Across the three areas (community, HD programs, organization) – group similar priorities and skills identified to do the work and determine the competency category that best describes them. These categories will serve as the internally-developed competencies for the health department.

## STEP 2: ASSESS THE STAFF

Following the identification of the internally-developed competencies, the health department will need to assess staff to understand what gaps or training needs may exist. MTPHI can assist in the creation of a health department specific survey that will assess staff based on the health department's internally-developed competencies and identify priorities to include in the Workforce Development Plan. Based on the competencies, the survey could consist of questions from (or related to) the following:

- Core Competencies for Public Health Professionals
- Public Health Workforce Interests & Needs Survey (PH WINS)
- Specialty-focused competencies (e.g., nursing, epidemiology, PHEP, etc.)
- de Beaumont Strategic Skills

It is anticipated that each competency may have several components to it. For example, if the competency selected is communication to stakeholders, the components could include questions on social media, communicating with policy and decision makers, presentation skills, etc. All questions will be structured in a manner to determine the following:

- The staff's current skill level / proficiency related to the competency
  - E.g., unable to perform → expert
- How important they feel this skill is to their role
  - E.g., not important → very important

The survey will be conducted in the format of the health department's choosing (electronic or paper). To ensure that Required Element C is addressed (findings from an equity assessment), the survey could include questions from the Health Equity at Work survey unless the health department defines their own health equity related competency and associated components.

MTPHI is available to assist in with the creation of the survey with input from the health department. The goal is to eventually have a menu of questions available for a variety of competencies so this process can be easily replicated at other health departments. This piece may require some workshopping as additional health departments participate and help to refine this process.

## STEP 3: WRITE THE WORKFORCE DEVELOPMENT PLAN

The results from the staff assessment will be summarized and compiled into a Workforce Development Plan. As outlined in Pathways Measure 8.2.1, the workforce development plan must also include measurable objectives and improvement strategies with timeframes (RE E). MTPHI, DPHHS, and the Rocky Mountain Public Health Training Center are available to assist health departments in the development of their training options / improvement strategies, as well as provide templates and examples to assist with the overall writing of their workforce development plans.

Per Measure 8.2.1 requirements, at least one of the WFD objectives will relate to health equity. This objective can be informed by the workforce assessment findings if the health department identified a health equity related competency. Alternatively, the health department may wish to pursue a more comprehensive health equity assessment, for example, the [Health Equity at Work survey](#), and use this information to develop an objective and action plan to include in their workforce development plan.

# CONCLUSION

There are many ways that health departments can pursue workforce development assessment and planning. This facilitation guide offers an innovative approach for small health departments by building a set of competencies based on priorities identified in the Community Health Assessment and Improvement Plan, as well as the health department's strategic plan and efforts to achieve the vision of Public Health 3.0.

This guide was created in partnership with the Montana Department of Public Health and Human Services (DPHHS) Public Health System Improvement Office (PHSIO) and the Rocky Mountain Public Health Training Center (RM-PHTC). To date, three Montana health departments have participated in and provided feedback on this process. Additional insights and lessons learned will be added as more health departments use this guide.

# RESOURCES

- [Core Competencies for Public Health Professionals | PHF](#)
- [Foundational Public Health Services Capacity and Cost Assessment | PHAB](#)
- [Public Health Workforce Interests and Needs Survey \(PH WINS\) | de Beaumont Foundation](#)
- [Staffing Up: Investing in the Public Health Workforce | de Beaumont Foundation](#)
- [Strategic Skills | de Beaumont Foundation](#)
- [Tools to Support Effective Workforce Development Planning | PHAB](#)

# APPENDICES

The following resources and templates can be used to assist with implementation of this facilitation guide.



# AGENDA TEMPLATE

Recommended meeting time: 3-4 hours; agenda can be customized as much as needed.

## [HEALTH DEPARTMENT] WORKFORCE DEVELOPMENT MEETING

Date, Time, Location

Outcome: *Creation of a set of internally developed competencies for [Health Department] that prioritizes the specific competencies and skills needed for the biggest impact on priorities identified in the CHA / CHIP, program areas, strategic plan, etc.*

### AGENDA

<b>11:00 – 11:15am</b>	<b>Welcome &amp; Introductions</b>
<b>11:15 – 11:30am</b>	<b>Overview – why are we here?</b>
<b>11:30 – 1pm</b>	<b>Develop a Set of Health Department Specific Competencies (pt 1)</b> <ul style="list-style-type: none"><li>• CHA / CHIP</li><li>• Health department programs and services</li><li>• Strategic Plan / organization as a whole</li></ul>
<b>1 – 1:30pm</b>	<b>Lunch / Break</b>
<b>1:30 – 3:30pm</b>	<b>Develop a Set of Health Department Specific Competencies (pt 2)</b> <ul style="list-style-type: none"><li>• Grouping of similar priorities and skills across the three areas</li><li>• Finalizing competency language</li></ul>
<b>3:30 – 4pm</b>	<b>Next Steps</b> <ul style="list-style-type: none"><li>• Based on the competencies identified / developed today, we will create an assessment tool for all staff to complete</li><li>• Once the assessment has been completed, we will use the results to determine workforce development priorities to include in our WFD plan</li></ul>

# WORKFORCE DEVELOPMENT MEETING PRE-WORK

To be shared with staff prior to the in-person meeting (either via email or printed copies).

## [HEALTH DEPARTMENT] WORKFORCE DEVELOPMENT MEETING

Date, Time, Location

Prior to our in-person meeting on [DATE], please consider the following questions from your position's point of view and your personal point of view:

1. Think about 1-2 specific health issues in your community – review the health needs / priorities identified in our most recent CHA and the goals / activities in our most recent CHIP.
  - a. What is the health department's role in addressing these issues and what skills are needed to do that?
  - b. What is your position's role, if any, in addressing these issues?
2. Think about our most recent Strategic Plan and our health department as a whole. In addition, please review the Executive Summary (pages 4-5) from the [Public Health 3.0](#) white paper.
  - a. What are the overarching gaps and what skills do we need to address them?
  - b. What are the overarching opportunities for improvement and what skills do we need to address them?
  - c. Think about your programs / position (can list them).
    - i. What gaps / opportunities for improvement exist and what skills are needed to address those?

# WORKFORCE DEVELOPMENT ASSESSMENT OUTLINE

This template can be used to summarize the internally-developed competencies, as well as draft the assessment tool that staff will complete. Each competency should have 3-5 statements for staff to self-assess their current proficiency and prioritize their training interests. The assessment tool can be entered into an online format (Survey Monkey, JotForm, Qualtrics, etc.) to simplify data collection and assist with analysis.

## [HEALTH DEPARTMENT] WORKFORCE DEVELOPMENT ASSESSMENT

### BACKGROUND

In [DATE], [Health Department] staff participated in a workforce development discussion that led to the creation of the following health department-specific competencies. These competencies reflect staff input on skills and knowledge that are needed in order to address public health priorities as identified by the Community Health Assessment and Community Health Improvement Plan, as well as the programs and services that the health department offers to the community. The purpose of this assessment is to assess current capacity / capability against these internally developed competencies and to identify priority areas for inclusion in the workforce development plan.

### INTERNALLY-DEVELOPED COMPETENCIES

- [List competencies]

The following assessment tool was created in consultation with existing tools and resources related to the public health core competencies and strategic skills, however, the specific questions and skills included in each competency have been tailored to reflect the internally-developed competencies.

## ASSESSMENT

### Instructions:

Please read each competency statement and think about the level at which you are currently able to perform that skill. Rate your level of proficiency for each area using the following scale:

- 1 = I am unaware or have very little knowledge of this skill
- 2 = I have heard of this, but have limited knowledge or ability to perform this skill
- 3 = I am comfortable with my knowledge or ability to apply this skill
- 4 = I am very comfortable with this skill / I could help others understand this skill

In addition to rating your current level of proficiency, you will also rank the competency statements based your personal and professional training priorities. The statement that is the highest priority / feels most important for you to receive training on should be ranked first, and so on.

At the end of each competency area, you will have an opportunity to add comments or questions. Please feel free to include specific training ideas or other considerations.

### Demographic Information:

Name:

Position:

Years in Position:

Years with Health Department (if different from above):

## Competencies:

### 1. Competency 1

[Health Department] defined this competency area as knowledge and skills related to...

*Proficiency (scale 1 – 4):*

To what degree are you able to effectively...

---

• Statement 1	1	2	3	4
• Statement 2, etc.	1	2	3	4

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*Prioritization (forced ranking):*

- Statement 1
- Statement 2, etc.

Comments / questions related to this competency (e.g., specific or suggested trainings, etc.):

# HEALTH DEPARTMENT WORKFORCE DEVELOPMENT PLAN

## TIMEFRAME

This plan was adopted on MM-DD-YYYY  
- Or -  
Timeframe: MM-DD-YYYY to MM-DD-YYYY



## PURPOSE

The purpose of this workforce development plan is to...

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## HEALTH DEPARTMENT PROFILE

Provide a brief description of your health department; include information on:

- Mission, vision, guiding principles
- Strategic goals
- Governance / organization
- Location & population served
- Learning culture
- Funding and training budget / resources

## HEALTH DEPARTMENT CAPACITY

### **Measure 8.2.1 Required Element A**

Provide a description of the current capacity of the health department both as a whole and within its sub-units.

# CURRENT WORKFORCE DEMOGRAPHICS

Suggested demographic details (adjust as needed):

Category	# or %
Total FTE / # of positions	
Administration	
Director / Managers	
Supervisors	
Medical Public health professionals	
Non-medical public health professionals	
Frontline staff	
<hr/>	
% paid by grants / contracts	
<hr/>	
Age	
<20	
20-29	
30-39	
40-49	
50-59	
>60	
<hr/>	
Primary Professional Disciplines / Credentials	
Leadership / Admin	
Nurse	
Epidemiologist	
Health educator	
Dietician	
Social worker	
Medical director	
Other	
<hr/>	
Retention Rates	
Employees retained for 5-9 years	
Employees retained for 10-14 years	
Employees retained for 15+ years	

## FUTURE WORKFORCE / PROJECTED CAPACITY

### Measure 8.2.1 Required Element A

**Include screenshot of [Public Health Workforce Calculator](#)** results and some discussion on the current collective capacity of the health department and projected capacity needs based on the Foundational Public Health Services, the jurisdiction's CHA / CHNA and CHIP / IP, the health departments strategic plan, and / or efforts to work toward [Public Health 3.0](#).

## ASSESSMENT RESULTS

### COMPETENCY ASSESSMENT & RESULTS

#### Measure 8.2.1 Required Element B

Provide a summary of the results from an organization-wide assessment of current staff capabilities against an accepted set of core competencies.

Add information about the in-person meeting where the health department team identified the health department-specific competencies and defined what those mean / how they relate to work identified in the CHA / CHNA, CHIP / IP, strategic plan, PH 3.0, and the health department's programs and services.

### EQUITY ASSESSMENT & RESULTS

#### Measure 8.2.1 Required Element C

Provide a summary of findings from an equity assessment that considers staff competence in the areas of cultural humility, diversity, or inclusion.

This does not necessarily need to be a separate section if the health department's internally-developed competencies include an area related to cultural humility, diversity, inclusion, etc.

# CONTINUING EDUCATION REQUIREMENTS

Multiple public health-related disciplines require continuing education for ongoing licensing/practice. Examples of licensures held by staff, and their associated CE requirements, are shown in the table below.

DISCIPLINE	CONTINUING EDUCATION REQUIREMENTS
Certified Lactation Counselor (CLC)	18 CEUs every 3 years
Certified in Public Health	30 CEUs every 2 years
Health Educator (CHES, MCHES)	75 CEUs every 5 years
Registered Dietitian	75 CEUs every 5 years
Registered Nurse (RN)	No longer required by the Montana Board of Nursing
Registered Sanitarian	15 CEUs every 2 years
Behavioral Health (LCSW, LMSW, LBSW, LCPC, LMFT, LAC, CBHPSS)	20 CEUs annually prior to renewal

# PRIORITIZATION

## Measure 8.2.1 Required Element D

Provide a list or description of the priority gaps identified with an explanation of the prioritization. At least one of the prioritized gaps must relate to the findings of the assessments in required element a, b, or c.

Feel free to include graphs or other visuals to help explain how priorities were identified / selected.

# WORKFORCE DEVELOPMENT OBJECTIVES & ACTIVITIES

## Measure 8.2.1 Required Element E

Identify at least two gaps (based on the prioritization) to address – develop measurable objectives and specific improvement strategies / activities, including timeframes.

COMPETENCY AREA	SMARTIE OBJECTIVES	IMPROVEMENT STRATEGIES / ACTIVITIES	TIMEFRAME
<i>Example: Health Equity</i>	<i>By DATE, offer at least two trainings on a specific health equity topic during all-staff meetings.</i>	<i>Identify two trainings or guest speakers to present to staff.</i>  <i>Schedule trainings to occur when the majority of staff are available.</i>  <i>Develop and distribute a feedback form for staff to note additional questions or training ideas after each training.</i>	<i>Complete by Q4</i>

## EVALUATION AND TRACKING

Describe how progress toward the WFD objectives and activities will be monitored / tracked (How will trainings be evaluated? How often will trainings be offered? What type of support will staff have in pursuing training opportunities?)

Also include details on how often the WFD assessment will be conducted (e.g., every three years, etc.).

This section could also describe the relationship between the WFD plan and individual development plans (IDPs) – see measure 8.2.2.

# LEARNING & EDUCATIONAL OPPORTUNITIES

## MEASURE 8.2.1 REQUIRED DOCUMENTATION 2

Provide a list of learning or educational opportunities that relate to the gaps identified in the workforce development plan. At least one of these will include training on equity, diversity, inclusion, cultural humility, etc.

The next several pages include training suggestions - you do not have to include any / all of these. Please tailor this section to fit your health department and the workforce development priorities identified through the assessment and included in the plan.

### PUBLIC HEALTH TRAININGS

Training	Provider / Platform	Core Competencies	Strategic Skills
<a href="#">LGBTQ+ Allies Training</a>	Bridgercare	Health Equity	Justice, Equity, Diversity, and Inclusion
<a href="#">Addressing Health Equity: A Public Health Essential</a>	CDC Train	Health Equity	Justice, Equity, Diversity, and Inclusion
<a href="#">Fundamentals of Communicating Health Risks</a>	CDC Train	Communication	Effective Communication
<a href="#">Health Equity &amp; Environmental Justice 101</a>	CDC Train	Health Equity	Justice, Equity, Diversity, and Inclusion
<a href="#">Health Literacy for Public Health Professionals</a>	CDC Train	Communication	Effective Communication
<a href="#">Implicit Bias: The Influence of your Unconscious Mind</a>	CDC Train	Health Equity	Justice, Equity, Diversity, and Inclusion
<a href="#">Introduction to Public Health Practice</a>	CDC Train	All	All
<a href="#">Overview of Public Health Data</a>	CDC Train	Data Analytics & Assessment	Data-based Decision Making
<a href="#">Project Planning</a>	CDC Train	Policy Development and Program Planning	Resource Management



<a href="#"><u>Social Movements in Public Health</u></a>	CDC Train	Community Partnership	Cross-Sectoral Partnerships
<a href="#"><u>Climate Change &amp; Human Health in Montana</u></a>	Montana Public Health Training Center	Leadership and Systems Thinking	Systems and Strategic Thinking
<a href="#"><u>Montana Public Health 101</u></a>	Montana Public Health Training Center	Public Health Sciences Leadership and Systems Thinking	Systems and Strategic Thinking
<a href="#"><u>Neurodiversity in the Workplace</u></a>	Montana Public Health Training Center	Health Equity	Justice, Equity, Diversity, and Inclusion
<a href="#"><u>Mental Health First Aid</u></a>	National Council for Mental Wellbeing	Community Partnership	Cross-Sectoral Partnerships
<a href="#"><u>Hot Topics in Practice</u></a>	Northwest Center for Public Health Practice	Leadership and Systems Thinking	Systems and Strategic Thinking
<a href="#"><u>Public Health Management Certificate</u></a>	Northwest Center for Public Health Practice	Leadership and Systems Thinking	Systems and Strategic Thinking
<a href="#"><u>Leadership Academy for the Public's Health</u></a>	Public Health Institute	Leadership and Systems Thinking	Systems and Strategic Thinking
<a href="#"><u>An Overview of the Policy Process in Public Health and the Need for Systems Thinking</u></a>	Public Health Learning Navigator	Policy Development and Program Planning	Resource Management
<a href="#"><u>Change Management: How Leadership Can Support Staff During Crises</u></a>	Public Health Learning Navigator	Leadership and Systems Thinking	Systems and Strategic Thinking
<a href="#"><u>Public Health Financial Management</u></a>	Public Health Learning Navigator	Public Health Sciences	Resource Management
<a href="#"><u>Systems Thinking: Through A Public Health Lens</u></a>	Public Health Learning Navigator	Leadership and Systems Thinking	Systems and Strategic Thinking
<a href="#"><u>Communicating and Disseminating Evidence to Decision Makers</u></a>	Rocky Mountain Public Health Training Center	Communication	Effective Communication
<a href="#"><u>Data State of Mind Online Modules</u></a>	Rocky Mountain Public Health Training Center	Data Analytics & Assessment	Data-based Decision Making

<a href="#">Evidence-Based Public Health</a>	Rocky Mountain Public Health Training Center	Public Health Sciences Policy Development and Program Planning	Systems and Strategic Thinking
<a href="#">Facilitation Foundations</a>	Rocky Mountain Public Health Training Center	Communication	Effective Communication
<a href="#">Health Equity: LGBTQ+</a>	Rocky Mountain Public Health Training Center	Health Equity	Justice, Equity, Diversity, and Inclusion
<a href="#">Trauma/ACES</a> <a href="#">Montana ACEs &amp; Resilience Resources</a>	UM Center for Children, Families and Workforce Development	Health Equity	Justice, Equity, Diversity, and Inclusion

## PROGRAM / POSITION SPECIFIC TRAINING RESOURCES

Training	Provider / Platform	P
<a href="#">Passport to Partner Services</a>	CDC Train	Communicable Disease
<a href="#">imMTrax Trainings &amp; Resources</a>	MT DPHHS PHSD	Immunization
<a href="#">Disease Intervention Specialist Training   DIS Training Course Checklist</a>	Center for Children, Families, and Workforce Development, University of Montana	Communicable Disease
<a href="#">Title X Provider Resources</a>	Montana Family Planning	Title X
<a href="#">National STD Curriculum</a>	University of Washington	Communicable Disease
<a href="#">Montana DPHHS Regional Immunization Meetings</a>	MT DPHHS PHSD	Immunization
<a href="#">Montana Breastfeeding Learning Collaborative</a>	MT DPHHS ECFSD	Home Visiting WIC
<a href="#">WIC Learning Online</a>	WIC works Resource System   USDA	WIC
<a href="#">Introduction to HIPAA for CHWs</a>	New England Public Health Training Center	Community Health Workers
<a href="#">Montana DPHHS PHEP Regional Grant Workshops</a>	MT DPHHS PHSD	PHEP
<a href="#">Naloxone Training</a>	Best Practice Medicine	Substance Use Prevention
<a href="#">Overdose Prevention in Virtual Reality</a>	Montana Public Health Institute	Substance Use Prevention

## EDUCATIONAL OPPORTUNITIES & RESOURCES

### Montana's Professional Associations & Training Centers:

- [Confluence Public Health Alliance](#)
  - [Montana Public Health Association](#)
    - [American Public Health Association \(APHA\)](#)
  - [Montana Environmental Health Association](#)
    - [National Environmental Health Association \(NEHA\)](#)
  - [Association of Montana Public Health Officials](#)
    - [National Association of County and City Health Officials \(NACCHO\)](#)
- [Montana Public Health Training Center](#)
  - [UM Public Health Certificate Scholarship Program](#)
- [Public Health System Improvement Office | PHSD](#)

### Montana Conferences & Convenings:

- Confluence Public Health Alliance Annual Conference
- Montana DPHHS Summer Institute

### Regional Public Health Training Centers:

- [Rocky Mountain Public Health Training Center](#)
- [Regional Public Health Training Centers](#)
- [Northwest Center for Public Health Practice](#)

### National Conferences, Convenings, & Resources:

- [National Network of Public Health Institutes \(NNPHI\)](#)
  - [NNPHI Annual Conference](#)
  - [Public Health Improvement Training \(PHIT\) and Open Forum](#)
- [National Association of County and City Health Officials \(NACCHO\)](#)
  - [NACCHO 360](#)
  - [Preparedness Summit](#)
  - [Public Health Law Practitioners Convening](#)
- [National Association for Local Boards of Health \(NALBOH\)](#)
  - [NALBOH Annual Conference](#)
- [Public Health Learning Navigator](#)
  - [Public Health Learning Agenda](#)

- [CDC TRAIN](#)
  - [Health Information Privacy and Confidentiality - CDC TRAIN - an affiliate of the TRAIN Learning Network powered by the Public Health Foundation](#)
  - [COVID-19: Data Sharing for Public Health Surveillance, Investigation and Intervention - CDC TRAIN - an affiliate of the TRAIN Learning Network powered by the Public Health Foundation](#)
- [Federal Emergency Management Agency \(FEMA\)](#)
  - [ICS-100: Introduction to the Incident Command System](#)
  - [ICS-200: Basic Incident Command System for Initial Response](#)
  - [Center for Domestic Preparedness | FEMA](#)

## ONLINE RESOURCES

### Community Health Assessments & Improvement Plans

- [Six Steps to Performing a Community Health Assessment | Public Health Learning Navigator](#)
- [Community Engagement | Public Health Learning Navigator](#)
- [Introduction to CASPER: Community Assessment for Public Health Emergency Response | CDC TRAIN](#)
- [Chapter 3. Assessing Community Needs and Resources | Community Toolbox](#)
- [Community Health Assessment and Improvement Planning | NACCHO](#)
- [Community Health Insights in the 406 | MT DPHHS](#)

### Strategic Planning

- [Strategic Planning | NACCHO](#)
- [Local Health Department Strategic Planning Guide | NACCHO](#)
- [Developing a Strategic Plan | Community Toolbox](#)
- [Strategic Planning Within the Context of the Ten Essential Services | Public Health Learning Navigator](#)
- [Introduction to Strategic Planning | CDC TRAIN](#)
- [Leadership and Systems Thinking Skills: What is Strategic Planning and How Do I Prepare? | CDC Train](#)

## Performance Management

- [Public Health Foundation](#)
- [Understanding Performance Management and Quality Improvement | ASTHO](#)
- [Performance Management Essentials | ASTHO](#)
- [Embracing Quality In Public Health: A Practitioner's Performance Management Primer | NNPHI](#)

## Quality Improvement

- [Roadmap to a Culture of Quality Improvement | NACCHO](#)
- [Leading Improvement Projects | RMPHTC](#) (self-paced online)
- [Targeting Improvement with AIM Statements | NNPHI](#) ([phlearningnavigator.org](http://phlearningnavigator.org))
- [Quality Improvement Series - CDC TRAIN - an affiliate of the TRAIN Learning Network powered by the Public Health Foundation](#) (requires CDC TRAIN log in)
  - [Quality Improvement 101 | CDC TRAIN](#) & [Quality Improvement 102 | CDC TRAIN](#)
  - [Introduction to Quality Improvement in Public Health \(1059243\) - CDC TRAIN - an affiliate of the TRAIN Learning Network powered by the Public Health Foundation](#)

## Workforce Development

- [Introduction to Workforce Development Planning for PHAB Accreditation | NACCHO](#)
- [Core Competencies for Public Health Professionals | Public Health Foundation](#)
- [Strategic Skills | de Beaumont Foundation](#)
- [Epidemiologist Competency Assessment Form | CSTE](#)

## Health Equity

- [Alphabet Soup: An A-Z Guide to LGBTQIA+ Terminology](#)
- [Health Equity Series | WiCPHET](#)
- Assessment tools:
  - [Health Equity at Work: Skills Assessment of Public Health Staff](#)
  - [CLAS Standards - Think Cultural Health | HHS](#)
    - [An Implementation Checklist for the National CLAS Standards](#)
  - [National Center for Cultural Competence \(NCCC\) | Georgetown](#)
    - [NCCC Self-Assessments](#)

# CORE COMPETENCIES & STRATEGIC SKILLS

## Core Competencies (Public Health Foundation):

- [Data Analytics & Assessment](#)
- Policy Development and Program Planning
- Communication
- Health Equity
- Community Partnership
- Public Health Sciences
- Management and Finance
- Leadership and Systems Thinking

## Strategic Skills (de Beaumont Foundation):

- Effective Communication
- Justice, Equity, Diversity, and Inclusion
- Data-based Decision Making
- Resource Management
- Cross-Sectoral Partnerships
- Systems and Strategic Thinking
- Community Engagement
- Change Management
- Policy Engagement

### 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



The Council on Linkages  
Between Academia and  
Public Health Practice

### The Public Health T—Complementing Specialized with Strategic Skills

