

14-02

STATEMENT OF POLICY

Preparedness Workforce Development and Training

Policy

The National Association of County and City Health Officials (NACCHO) supports comprehensive, ongoing workforce development and training in emergency preparedness for local health department staff, volunteers, and their community partners. NACCHO encourages local, state and the federal government to support the provision of training and education at the local level to maintain the capability of local health departments to effectively prepare for, respond to, and help communities recover from the effects of a public health emergency and to take steps to mitigate those effects before disaster strikes.

In order to develop a local health department's emergency preparedness workforce, NACCHO supports the following:

- Funding and resources at the local, state, and federal levels to support public health workforce development and training for optimal emergency preparedness planning, response and recovery capabilities.
- Training for public health workforce, as well as volunteers, on national frameworks for planning for and responding to emergencies, including the following suggested resources:
 - National Health Security Strategy¹
 - National Preparedness Goal²
 - National Mitigation Framework
 - National Response Framework
 - National Disaster Recovery Framework³
 - National Center for Disaster Medicine and Public Health Core Competencies⁴
- Capability-based emergency preparedness and response training for public health preparedness staff, in accordance to national standards.⁵
- Baseline community-specific training in the National Incident Management System (NIMS) and Incident Command System (ICS) and its applicability to public health response activities for all local health department staff, volunteers, and community partners.
- Emergency preparedness concepts. All staff should be trained and prepared to respond and recover from a variety of public health incidents/events.
- Use of the most current training and education resources from CDC Preparedness and Emergency Response Learning Centers,⁶ the Federal Emergency Management Agency (FEMA), NACCHO, including Model Practices, and state, county, and municipal subject matter experts.



- Development and annual updating of workforce development plans for each local health department based on training needs assessments, jurisdictional risk assessments, emergency plans, and unique local features and demographics.
- Conducting community-wide exercises to test, evaluate, and improve public health emergency response capabilities and inform workforce development needs at least once per year, including a full-scale exercise at least once every five years. Surge capacity management should be incorporated into exercises where feasible. This would include the use of volunteers in workforce development activities and, in particular, the use of local medical reserve corps (MRC) volunteers.
- Usage of continuous quality improvement models that link workforce development and training to evaluations of response and recovery capabilities and all-hazards response planning.
- Incorporation of emergency response and recovery training into the curricula of undergraduate and graduate-level public health programs.
- Encouraging local health departments to adopt a certification and credentialing system for public health workers.

Justification

Disaster response and recovery starts and ends at the community level. Better prepared local public health workforce directly correlates into a quicker response and recovery from a hazardous incident. As a result, fewer damages will be incurred by local residents and the community will have a greater potential for a full recovery. Therefore, local responders must have the skills and understanding on how to mitigate, plan for, respond to, and assist their local community to recover from any emergency situation. As a key component of a local emergency response team, public health workers must have the skills to identify and evaluate the health impacts of an incident, further determining if the incident warrants activation of incident management functions and potential emergency response operations. Local health departments have primary responsibility for the public health of their jurisdictions, and workforce development is critical to their ability to uphold this responsibility during an emergency or disaster.

Public health personnel must be trained in NIMS and ICS so that they possess a common understanding and knowledge of the concepts and principles in order to work together in responding to all-hazards incidents with their local, state, and federal partners. Because of the complexity that incident management can reach involving numerous entities, it is important that all eligible public health workers and volunteers be trained in the various emergency management frameworks and systems at the basic level recommendations of NIMS 700 and ICS 100. Public health preparedness staff at local health departments need extensive, in-depth training to perform their specialized incident command and management duties, while non-preparedness staff should be cross-trained in specific emergency response functions along with their daily areas of expertise. This supplementary, targeted training for non-preparedness staff can allow their specific skill sets to be used in a large-scale response in which additional personnel are needed.

Volunteers and other community partners that may serve in an emergency must also have regular training and education sufficient to support response and recovery. Continuous engagement of

volunteers and community partners will ensure that their skill sets are up to date and build stronger relationships that improve communication, retention, and overall community resilience⁷. In particular, health departments should work closely with their MRC and/or the Community Emergency Response Team (CERT), to provide training and education opportunities. Volunteers represent a well-organized source of skills and resources committed to the public health of their communities.

Workforce development plans for staff and volunteers should be competency-based. Competency-based frameworks strengthen the public health workforce by building capacity, helping workers adapt to changing environments, and integrating into the broader emergency response system. In order to best meet the specific needs of the workforce, local health departments should conduct training needs assessments that identify gaps in the competencies needed to carry out an all-hazards response plan. They should also take into account the emergency plans and the community's risk assessment to identify and develop specific training needs. Workforce development plans should be continuously updated through regular training workshops to ensure that they align with a department's needs, as well as in accordance to best practices, federal guidelines, and lessons learned.

Workforce development also includes regular exercising of response capabilities to ingrain the skills and knowledge gained through training and education and to identify gaps and areas for improvement.⁸ Exercises should be community-wide and include a wide range of response partners, community organizations, at-risk populations, and voluntary organizations active in disaster (VOAD), including MRC or CERT. Exercising together enhances coordination with all response partners and helps ensure that all needed resources are brought to the table during a disaster. Inclusive exercises can also enhance community resilience by building relationships, improving communications and information sharing processes, and increasing buy-in across the community regarding the value of emergency planning and response. Resilient communities are better able to withstand the damaging effects of a disaster, respond effectively, and recover quickly.

Workforce development and training should be addressed as part of a continuous quality improvement strategy. Evaluations of exercises and responses to real events should inform revisions to the workforce development plan. These evaluations will also prompt revisions to all-hazards plans, leading to more updates to workforce development plans to reflect changing all-hazards response needs. Programs such as Project Public Health Ready and the applicable standards and measures provided by the Public Health Accreditation Board can assist local health departments with establishing and maintaining processes for an overall culture of continuous quality improvement.^{9 10} Training public health students in the principles of emergency response and recovery before they join the public health workforce can further establish a commitment within public health to maintaining a knowledgeable and capable workforce that is ready, willing, and able to respond and recover from emergencies.

Workforce development and training must be an integral part of every local health department's strategic plan and regular operations. By continuously assessing their capabilities and maintaining and improving the response and recovery capabilities of their workforce, local

health departments can prepare themselves to respond to and recover from the evolving list of public health threats and disasters that may impact their communities.

References

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Record of Action

Proposed by NACCHO Incident Management Workgroup

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