Welcome to the NACCHO & CDC Food Safety Sharing Session

Workforce Development

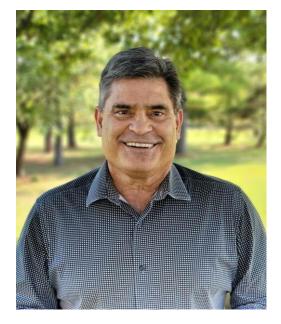
May 23, 2023 3:00 PM - 4:00 PM

Listen via your computer speakers or <u>Call</u>: 301-715-8592 / <u>Webinar ID</u>: 819 5023 5604 **Questions may be submitted/upvoted via the Q&A box. This webinar is being recorded.**



Today's Speakers











Lisa Macron, MPH

Health Director Granville and Vance Counties (NC)

Alan Melnick, MD, MPH, CPH Director/Health Officer

Clark County Public Health (WA)

Today's Speakers



Ki Straughn

Environmental Health Services Supervisor Food & Facilities, Public Health – Seattle & King County



Ashley Edmiston

Director, Workforce and Leadership Development

National Association of County and City Health Officials (NACCHO)

Webinar Agenda



The Local Public Health Workforce Presentation

Panel Discussion

Questions & Answers

The Local Public Health Workforce

Ashley Edmiston, MPH Director, Leadership and Workforce Development NACCHO



Ideal State



Public Health 3.0/Community Health Strategist



The Community Chief Health Strategist will... <

PRACTICE #1

adopt and adapt strategies to combat the evolving leading causes of illness, injury and premature death.

PRACTICE #2

develop strategies for promoting health and well-being that work most effectively for communities of today and tomorrow.

PRACTICE #3

identify, analyze and distribute information from new, big, and real time data sources.

PRACTICE #4

build a more integrated, effective health system through collaboration between clinical care and public health.

PRACTICE #5

collaborate with a broad array of allies, including those at the neighborhood-level and the non-health sectors – to build healthier and more vital communities.

PRACTICE #6

replace outdated organizational practices with state-of-the-art business, accountability, and financing systems.

PRACTICE #7

work with corresponding federal partners – ideally, a federal Community Chief Health Strategist – to effectively meet the needs of their communities.

Revised 10 Essential Public Health Services

Assessment THE 10 ESSENTIAL PUBLIC HEALTH SERVICES Assess and monitor **Build and maintain a** population To protect and promote strong organizational health the health of all people in infrastructure for all communities public health Improve and innovate The 10 Essential Public Health Services provide a through evaluation. research, and quality framework for public health improvement to protect and promote the health of all people in all communities. To achieve Assurance Equity optimal health for all, the **Build a diverse and** Essential Public Health skilled workforce Services actively promote policies, systems, and services that enable good health and seek to remove obstacles and systemic and Enable structural barriers, such as equitable poverty, racism, gender access

discrimination, and other

forms of oppression, that

inequities. Everyone should

have resulted in health

have a fair and just opportunity to achieve good health and well-being.



actions

Investigate.

diagnose, and

address health hazards and root causes

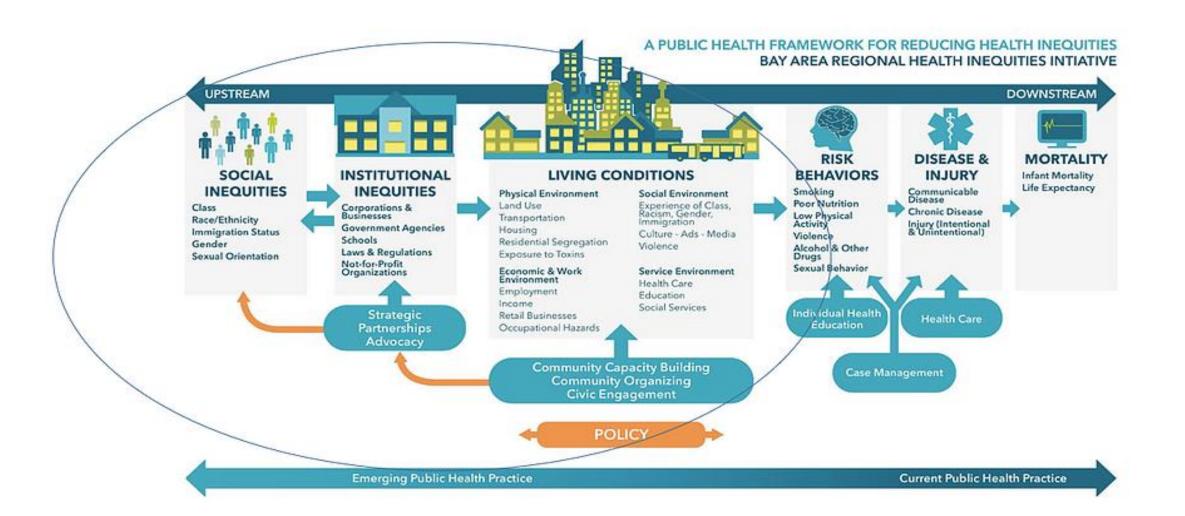
Communicate

effectively to inform

and educate

Created 202

BARHII Framework



Current State



Public Health Authority Challenges and Limitations

- Prohibit requiring masks in any situation, including cases of active tuberculosis. In North Dakota, a new law would remove the authority of the state health office to require face masks or covering.
- Block the closure of businesses necessary to prevent the spread of disease, allowing for super spreader venues. In Kansas, a new law removes the Governor's ability to close businesses during a public health emergency.
- Ban the use of quarantine. In Montana, a new law prohibits local board of health emergency orders from separating those individuals who are not yet ill, but reasonably believed to be infected or exposed. Prohibition of quarantine orders undermines the basis of infection control and would make it impossible to stop outbreaks of deadly diseases that are spread by individuals who are not yet symptomatic.
- Block state hospitals and universities from requiring vaccinations for employees and students in dormitories to protect state residents. In Arizona, a new law prohibits requirements that a person receive a vaccination, except in K-12 school settings and creates criminal penalties for violating the ban.
- Strip local governments, including local health agencies, of the ability to respond to local conditions in an emergency. In Texas, a proposed bill would preempt local emergency action to the extent that it is inconsistent with orders of the Governor or state health department.

Threats to Local Health Officials and staff



Harassment of local public health professionals during the first year of COVID-19 (and beyond) pervasive



Most jurisdictions did not receive protections from federal, state, and/or local entities to combat this harassment



"I have never been subjected to the racist, xenophobic, and threatening behavior that greeted me in the County Council meeting



Almost 1 in 12 LHDs reported there were reassignments and/or firings due to conflicts between the public and political leaders



Jurisdictions reporting harassment from the public also have higher odds of reassignments and/or firings due to conflicts between the public and political leaders

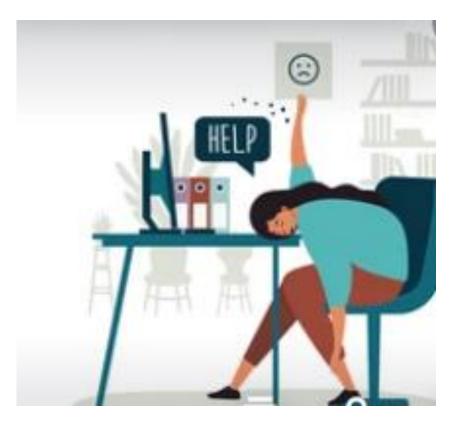
From McCall TC, Alford AA, Cunningham MC, Hall K, & Royster J; 2022

Health Officials Had to Face a Pandemic. Then Came the Death Threats.

Other challenges - Workforce Pipeline

- Historically, LHDs have had difficulty in **difficulty in recruiting graduates** from public health programs. ASPPH reported that **16%** of graduates went to work for the government.
- NACCHO's 2017 Forces of Changes survey showed that the majority of LHDs had difficulty filling positions, particularly clinical positions. Challenges included: **pay not competitive, insufficient experience, insufficient knowledge**, and **undesirable geographic area**.
- These challenges still exist, and when combined with the extreme polarization of the COVID-19 response activities, the effect of public perceptions of health department, and the challenges faced with retaining the current overworked and overburdened workforce, there is a looming concern for the future of the public health workforce.

What does this tell us?



Bridging the Gap

What is NACCHO doing to help address these challenges?



NACCHO's 2023 Legislative Agenda

Strengthen and Support the Public Health Workforce

Bolster and improve access to federal public health funding, including resources to support public health infrastructure and data modernization at the local health department level.

Ensure federal public health funding flows from the federal level to states and local communities quickly and equitably.

Address wide range of public health concerns through work in coalition with partners.

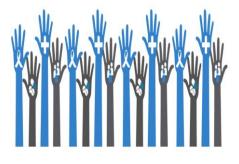
What a Healthy Workforce Looks Like



Workforce that reflects the community we serve.



Governmental public health is viewed as a desirable, meaningful, and safe career pursuit.



Access to timely and relevant trainings around core and strategic skills.



Continued legislation to support the public health workforce.





Continued support for supplemental workforce expansion

NACCHO Addressing Workforce

At the Present...

- Advocacy
 - Funding
 - Infrastructure
 - Loan Forgiveness
- <u>Roots of Health Inequity</u>
- Management Essentials
- Adaptive Leadership Academy
- NACCHO University
- Joy in Work Toolkit
- Public Health AmeriCorps
- 2020 Forces of Change: COVID Edition

In the works...

- Ongoing Advocacy
- New LHO Training Program/Survive and Thrive
- Building an Equitable Workplace Toolkit
- Marketing and Branding your LHD Jobs Toolkit
- 2022 National Profile of Local Health Departments
- Rural Health Department Collaborative
- Revised Roots of Health Inequity Course
- Growth of Management Essentials
- Strengthening Public Health Communications Training and Resources
- And more....



Ashley Edmiston, MPH Director, Leadership and Workforce Development aedmiston@naccho.org

Panel Discussion

- 1. What impacts has Covid-19 had on your workforce Before/During/Post?
- 2. Covid-19 brought a lot of us to work together what new collaborations have you seen with other professionals?
- 3. What are your thoughts on more sustainable funding source for public health?
- 4. How are you dealing with post-Covid recovery and now succession planning that will impact your workforce development?
- 5. How are you currently reengaging staff and creating excitement again after covid?
- 6. Strategies for recruiting and retaining Public health work force what innovative ways are new hires being recruited to the public health profession?

Questions?

Use the Q&A box to submit your questions for the panelists!

Thank you for attending today's webinar! You will receive a follow-up email with the webinar recording and slides.

