STATEMENT OF POLICY

Workforce Certification and Credentialing

Policy

The National Association of County and City Health Officials (NACCHO) recommends prudence in the establishment of new programs to certify or credential public health workers. NACCHO recommends that these programs possess the following attributes:

1) The terms certification, credentialing, public health worker, and public health workforce are clearly defined;
2) The element or subset of the workforce that requires certification or credentialing is clearly specified;
3) The program is based on evaluations of the value that certification and/or credentialing programs have in those states where such programs are already adopted;
4) Certification and/or credentialing processes are developed following agreement on core competencies for those working in governmental public health agencies at the local, state, and federal levels through role delineation studies or other similar methodologies; alternatively, professional certification and/or credentialing processes could be accepted without this agreement as long as they are not a prerequisite for working in a local health department;
5) Resources are made available to support participation, are accessible to all members of the subset of the workforce possessing the certification, and positive incentives are in place to encourage both workforce and local public health agency participation and support;
6) The outcomes of participation in the program demonstrate value to local practice and to the public good, and the credentialing and certification of public health workers is based upon the identification and subsequent development of knowledge, skills, and abilities that result in competencies useful in actual local public health practice;
7) State and national systems are compatible, non-duplicative, and coordinated with degree programs offered through schools of public health, other academic venues where the public health workforce is prepared, and with other credentialing processes and programs where the workforce is also prepared;
8) Credentials and/or certificates are recognized nationally;
9) Credentialing and/or certification of members of the public health workforce is grounded in contemporary public health practice and advised by an expert committee that includes substantial representation from leaders and practitioners of local public health; alternatively, professional credentialing and/or certification of a subset of the public health workforce is acceptable if it is grounded in professional academic competencies and as long as the certification is not a prerequisite for working in a local health department;
10) Practice-based credentialing and/or certification systems value and recognize competent performance and experience of those currently in the public health workforce and give such information at least as much weight as evidence from completing education or training programs or passing a written test; for
some professional workforce staff, academic-based credentialing and/or certification systems recognize achievement of academic competencies in their chosen profession;
11) Certification and/or credentialing systems attest to an individual’s basic familiarity with the multidisciplinary nature of a public health approach;
12) Continuing education is required to maintain the certification and/or credentials; in addition to professional development, the maintenance of the certification process provides an opportunity to recognize the acquisition of practice-based competencies.

Justification

Governmental public health is a shared enterprise, conducted by a collection of individuals from a wide variety of academic backgrounds and with a wide variety of professional training and credentials.

National interest demands concerted attention to public health workforce development.

Several state-specific programs certifying local public health officials are currently in place, yet no systematic evaluation has taken place to demonstrate the utility of these programs. Other states are exploring certification and credentialing options for local public health workers.

Finally, the National Association of County and City Health Officials (NACCHO) has developed the Operational Definition of a Functional Local Health Department. The Operational Definition defines the capacities communities can reasonably expect of their local governmental public health departments and it is necessary to ensure that the public health workforce is competent to provide those capacities. Therefore resources may be necessary for workforce certification/credentialing.

Record of Action
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