

Western Region Public Health Training Center

Annual Report | December 2023



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A LETTER FROM OUR DIRECTOR

Dear community,

I am writing to share with you the significant impact of the Western Region Public Health Training Center (WRPHTC) in our ongoing mission to support and enhance the public health workforce throughout our region. As one of the ten regional centers dedicated to advancing public health education and training, we are immensely grateful for the close partnerships we have cultivated with community-based training partners in every state within our region.

At WRPHTC, we are committed to building on our strengths and continually evolving to meet the dynamic needs of the public health workforce. Our efforts include conducting comprehensive training needs assessments to inform workforce development plans,



developing and delivering trainings based on public health competencies and identified gaps, and providing experiential learning opportunities for emerging and future leaders through our professional Leadership Institute and student-focused Future Leaders program.

The past year has been particularly impactful, with 1,149 participants from 13 local health departments engaging in our needs assessment survey. Notably, 45% of respondents indicated having less than five years of experience in public health. This statistic is concerning, especially when coupled with the national estimate that nearly half of state and local public health employees have left their positions. It underscores the urgent need for supporting and sustaining a strong, competent, and collaborative public health workforce.

To address this pressing need, the WRPHTC provided a total of 545 trainings to 37,519 participants during the 2022-2023 period. We also provided 31 stipends to support student public health projects in the region. Additionally, recognizing the linguistic diversity within our region, we offered some of our flagship trainings in Spanish, ensuring accessibility to a broader audience. Furthermore, we are proud to announce the launch of our Leadership Institute, an initiative aimed at equipping emerging public health and primary care leaders with the requisite skills and knowledge to navigate the complexities of their roles effectively. This series of interactive, live trainings marks a significant stride towards fostering leadership excellence within our sector.

Our commitment to diversity and accessibility is further evidenced by our diverse training platforms, including live webinars, in-person workshops, self-paced modules, podcasts, and recorded YouTube videos. By offering a variety of modalities, we strive to extend the availability of workforce development opportunities and cater to the diverse needs of our region. In conclusion, the work of the WRPHTC remains pivotal in fostering a resilient and skilled public health workforce capable of addressing the challenges of today and tomorrow. We are deeply committed to continuing our efforts in collaboration with our partners- and you- to ensure the health and well-being of communities across our region.

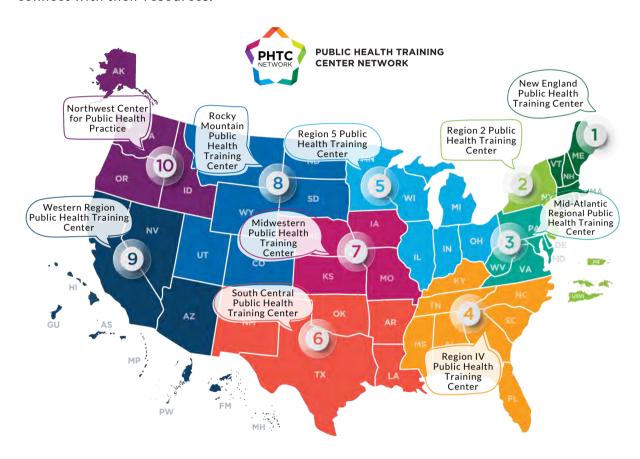
Sincerely,

Kelly A. Reynolds, MSPH, PhD

Director

PUBLIC HEALTH TRAINING CENTER NETWORK

The Public Health Training Center (PHTC) Network is a consortium of 10 Regional Public Health Training Centers that collectively represent the nation's most comprehensive resource for public health workforce development. We help sustain a skilled public health workforce by providing access to world-class professional development, experiential learning, consulting and technical assistance. Click on the hyperlink for each regional public health training center below to connect with their resources.





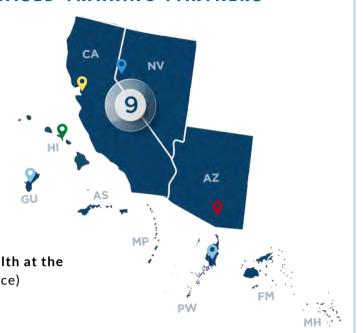
WESTERN REGION PUBLIC HEALTH TRAINING CENTER

We strengthen the capacity of the public health workforce by identifying and addressing competency gaps and developing interactive, skill-based training. We're grateful to all the work our partners have accomplished towards this mission during this first project year.

2022-2023 COMMUNITY-BASED TRAINING PARTNERS

- Hawai'i Public Health Institute

 Honolulu, HI
- Larson Institute for Health Equity & Impact Reno, NV
- Pacific Island Health Officers Association Honolulu, Guam, and Palau
- Public Health Institute
 Oakland, CA
- Mel & Enid Zuckerman College of Public Health at the University of Arizona (WRPHTC Central Office) Tucson, AZ



OUR SERVICES

TRAINING NEEDS ASSESSMENTS

We assess training needs, preferences, and the public health core competencies to inform workforce development plans.



PROFESSIONAL DEVELOPMENT

We create and deliver free, skill-based training to address gaps identified by training needs assessments.



EXPERIENTIAL LEARNING

Support for students conducting applied public health experiences via training and funding during the course of their projects.



WORKFORCE TRAINING NEEDS ASSESSMENT

A trained and competent workforce is essential for health departments to effectively address the population's public health issues. Assessing the training needs and competency gaps of the public health workforce is key to identifying workforce development activities and ultimately increasing the capacity of the workforce to improve health equity and respond to emergencies. On top of an already existing workforce shortage, a rapid exodus of public health employees (an estimated 46% of state and local public health employees) from health departments in the past 5 years has exacerbated this shortage and resulted in a loss of experience and knowledge within the sector.

The WRPHTC has worked with its community-based training partners to administer the Public Health Core Competency Self-Assessment and Training Preferences Survey (PHCCSTPS) to state, county, and tribal health departments in Region 9. The PHCCSTPS is an online tool for assessing the skill sets and identifying the training needs of public health workers. This tool was used and adapted for state and local health department workforce assessments, to assess their training needs and public health competencies.



1,149 members of the public health workforce were surveyed about their training needs (2022-2023).



13 local health departments in Arizona and California implemented the PHCCSTPS in

the last project year to inform workforce development planning.

CHARACTERISTICS OF RESPONDENTS

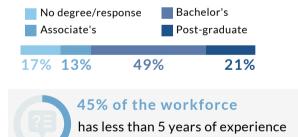
Average Age of Respondents

Less than 29 years	17%
30-44 years	41%
45-59 years	33%
60+ years	9%

Length of Employment at Agency

Less than 1 year	20%
1-2 years	21%
3-4 years	12%
5-9 years	18%
10 or more years	28%

Highest Degree Obtained



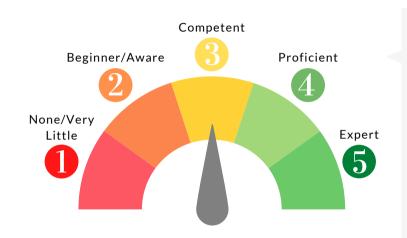
Length of Employment in Public Health

working in public health.

Less than 1 year	14%
1-2 years	17%
3-4 years	14%
5-9 years	20%
10 or more years	35%

PUBLIC HEALTH COMPETENCY ASSESSMENTS

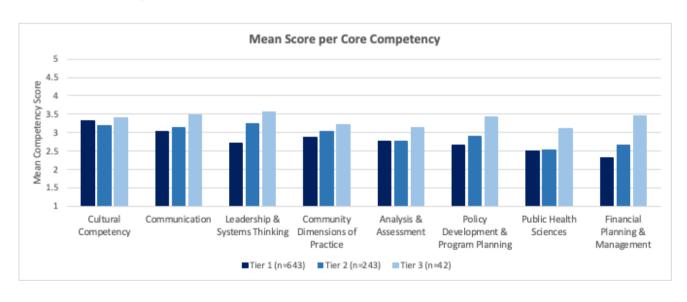
Each core competency was assessed with multiple questions. For each of these questions, a respondent rated their skill level using the scale portrayed in the graphic below. The multiple questions for an individual competency were combined (e.g., averaged) to form an overall score for the core competency. Within the literature, a training gap is normally identified when the mean score within a competency domain is below 3.0 (competent).



Less than half of the professionals in nonmanager and mid-level manager positions reported feeling competent (i.e., reported skill levels of 1 or 2) in the areas of Public Health Sciences, Financial Planning and Management, Policy Development and Program Planning, Leadership & Systems Thinking, and Analysis and Assessment across all states surveyed.

Tier 1 respondents (Public Health Professionals) rated **Cultural Competency** as their highest skill area, followed by **Communication**. Tier 2 respondents (Managers and Supervisors) and Tier 3 respondents (Directors and Senior Leaders) reported the highest levels of competence in **Leadership & Systems Thinking**. **Financial Planning & Management** and **Public Health Sciences** was the lowest skill areas for Tier 1 and **Public Health Sciences** was the lowest for Tier 2.

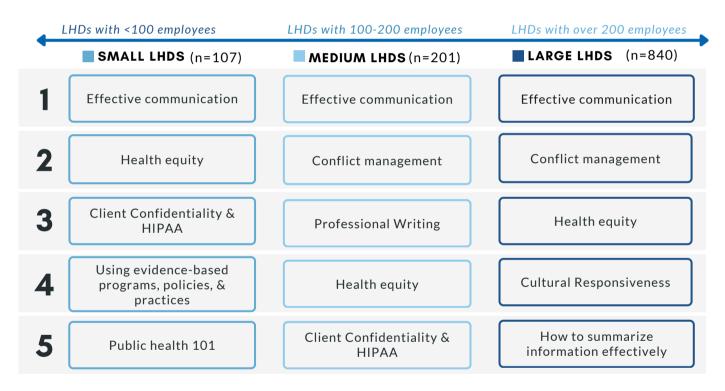
Directors and senior leaders self-report higher levels of competence across all competency domains than their staff. However, survey results include smaller numbers of Tier 3 professionals, increasing variability between the states and making results less generalizable. **Public Health**Sciences and Analysis & Assessment were the areas with the lowest scores for Tier 3.



TOP TRAININGS NEEDED FOR THE JOB

Each community-based training partner worked with health departments and public health agencies in their relative state to customize and adapt the training needs assessment to their needs. While survey items related to the public health core competencies are consistent throughout the WRPHTC's surveys, the list of general training topics presented to survey respondents can vary slightly survey to survey.

The table below outlines the top five trainings selected as 'needed for the job' by the region's workforce, stratified by the workforce size of each local health department (LHD). The topic **Effective Communication** and **Health Equity** appeared in the top 5 for all sizes of LHDs. **Client Confidentiality & HIPAA** was also a popular training topic, appearing in the top 5 for both small and medium LHDs. **Conflict Management** likewise appeared among the top 5 trainings for medium and large LHDs.



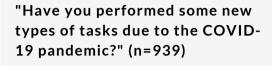
Respondents were also asked about training topics they wanted, that were not necessarily needed for their jobs. Popular training topics selected as of interest by all respondents were **How to**Summarize Information Effectively, Professional Writing, Leadership Skills, and Grant Writing.

Training needs also differed by Tier level. The training topic selected most often as needed by both Tier A and Tier 1, those without management responsibilities, was **Effective**

Communication. For Tier 2, mid-level managers, Coaching & Mentoring and Effective Supervision tied as the top two training topics needed. Tier 3 respondents, which includes directors and senior leaders, selected Leadership Skills and Improving Program Outcomes & Measures as their top two training topics needed.

COVID-19 IMPACT ON WORK

Some surveys implemented after the COVID-19 response included a series of questions related to the impact of COVID-19 on employees' work to better gauge past, present, and future training needs and operational priorities.





"Did you need training to perform any of your new tasks?" (n=636)



About two-thirds of respondents (66.7%) said that they had to perform new tasks due to the pandemic. The 626 respondents who reported performing new tasks were asked "Did you need training to perform any of your new tasks?" Three of every five (61.5%) said Yes.

Open-ended responses were solicited about new tasks performed as part of the COVID-19 response. Many responses included contact tracing and case investigation, testing and vaccination-related tasks, providing guidance and enforcing protocols, and communication and outreach.

"Did you get the training needed to perform your new tasks?" (n=385)

Yes	46%
Partly	46%
No	8%

The 385 respondents who said that they needed training for new tasks were then asked "Did you get the training needed?" Of these respondents, 177 said Yes; 178 said Partly; and 30 said No.

Finally, the 626 respondents who reported performing new tasks were asked "On average, how confident did you feel about performing the new tasks related to the COVID-19 pandemic?" The majority (60%) said that they felt confident or very confident. The majority (57%) also said their volume of work increased somewhat or substantially.

Confidence Performing New Pandemic Tasks (n= 626)

Not at all confident	3.2%
A little confident	7.7%
Somewhat confident	30%
Confident	41%
Very Confident	18%

Changes in Overall Volume of Work during COVID-19 response

Decreased substantially	1.6%
Decreased somewhat	21.6%
Not changed	20%
Increased somewhat	22.5%
Increased substantially	34.7%

TRAINING DEVELOPMENT

The WRPHTC provided **545 trainings** during our 2022-2023 project year, training **37,519** participants. This includes new trainings (such as self-paced courses, live webinars, and inperson workshops), as well as previously developed online courses still relevant and available to the workforce. The most popular self-paced courses among our learners this past year are outlined below.

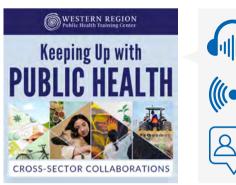
	1	10 Most Popular Self-Paced Courses (2022-2023) #re	<u>gistrants</u>
4.0	Stock Albuterol Inhaler Training for School Personnel	1,603	
FFF	13 new self-	Motivational Interviewing	1,458
	paced courses	Kyah's EPICourse	1,341
		Preventing Legionnaires' Disease	1,010
	491	Kyah's EPICourse for Food Service	835
total courses taken		Public Health Essentials in Action	827
		Recognizing and Challenging Stigma	523
04.005		Communication Skills for Successful Healthcare Team Relationships	447
34,285 self-paced	Nutrition and Mental Health	416	
learners		Public Health Ethics	373

Over 30% of the populations of Arizona, California, and Nevada are Hispanic. We began translating some of our most popular eLearning courses into Spanish to increase accessibility of our learning opportunities for our region's large Hispanic population. Now available are our courses on Public Health Essentials in Action, Building Community Leaders: An Advocacy Guide, Motivational Interviewing, Kyah's EPICourse for Food Service, and Sexual Violence Training for Community Health Workers. Additionally, our partners at the Larson Institute offer an excellent asynchronous Cultural Competency course, in addition to in-person trainings in Spanish.

5 Self-Paced Courses Available in Spanish: Fundamentos de Salud Pública en Acción Construyendo Líderes Comunitarios: Una Guía de Abogacía Entrevista Motivacional Kyah's EPICourse para el Servicio de Alimentos Capacitación de Violencia Sexual para Trabajadores Comunitarios de Salud/Promotoras

Additionally, we collaborated with our partners to identify experts in leadership, organizational change, strategic communications, and cross-sectoral collaboration to prepare for the launch of our inaugural Western Region Leadership Institute, a training series for emerging leaders in public health and primary care that begins in January 2024.

We continued to expand our offerings in more modern virtual training formats, releasing a third season of our podcast *Keeping Up With Public Health*. This latest season featured conversations with professionals working across sectors for health promotion. From the role of art in building resilience to decreasing the digital divide, we discussed practical approaches for collaborating to achieve health equity.





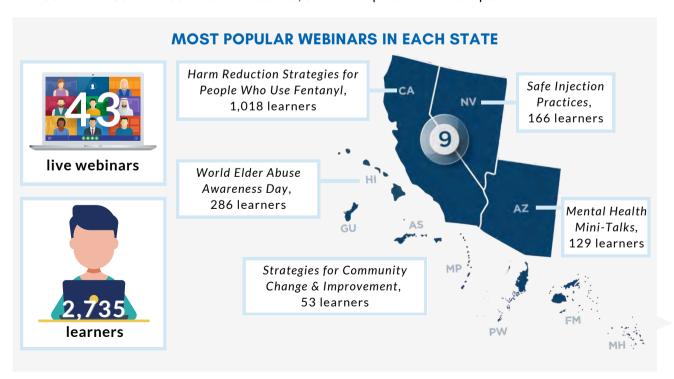




Episodes received over 1,300 plays altogether and were an increasingly popular format across age groups. While the majority of listeners were 18-27 years of age (87%) in the 2018-2022 period, the majority of listeners (38.8%) are now 45-59 years of age. About 80% of those that provided feedback reported their understanding of the subject matter covered in the podcast improved.



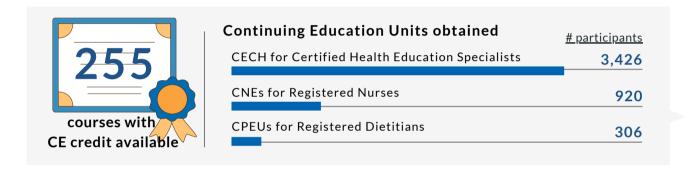
Our training partners have implemented live or pre-recorded webinar series, focused on topics from health equity to harm reduction to domestic violence. Over 40 webinars were implemented during the first project year, along with 61 pre-recorded YouTube videos that are the preferred format for the US-Affiliated Pacific Islands, and 11 in-person workshops.



CONTINUING EDUCATION CREDITS

The WRPHTC provides Continuing Education (CE) credits for many of its courses, as an incentive for public health and other health professionals to take trainings. We have been both an accredited provider of Continuing Education Contact Hours (CECH) for Certified Health Education Specialists (CHES) and Continuing Professional Education Units (CPEU) for Registered Dietitians. Our partners at the Hawai'i Public Health Institute (HIPHI) additionally have acquired CEs for Certified Substance Abuse Counselors (CSACs) and Licensed Social Workers (LSWs), Licensed Clinical Social Workers (LCSWs).

During the past project year, the WRPHTC provided 255 free courses that were approved for CE credit. CHES credits have been the most popularly acquired credit, with 3,426 CECH for CHES obtained through WRPHTC courses from July 2022 through June 2023.



Top Self-Paced Trainings Taken for CHES Credits (2022-2023)

Nutrition and Mental Health

There are many factors related to the prevention and treatment of mental health disorders and substance use disorders, and there is developing evidence that nutrition plays a role. This series of modules is designed to introduce evidence connecting nutrition to the treatment and prevention of depression, anxiety, and substance use disorders, with practical public health applications.

Addressing Bias with Inclusive Communication

Using inclusive language is one way to address bias in order to create a safe, positive environment for employees and clientele. A positive environment will engage both staff and the public, increasing productivity and satisfaction. Public health and health professionals will be challenged to improve their understanding of implicit bias and inclusive language to implement a more equitable workplace in this course.

Using Social Media for Health Communication

Social media is an ever-growing outlet that allows people and organizations to share and spread information to a wide audience. This can make sharing health resources and information with your community more simple, wide-reaching, and impactful. This training will teach you 6 rules of social media for creating effective posts. You will have the opportunity to practice identifying components of well-executed posts, learn positive ways to interact with your virtual community, and optionally create and share your own social media post.

STUDENT FIELD EXPERIENCE PROJECTS

As part of our mission to build and support a skilled public health workforce, the WRPHTC helps support students conducting public health projects in our region. The WRPHTC works with its partners to market the opportunity to academic health programs and distribute support for students across our region. During the 2022-2023 project year, the WRPHTC supported 31 student projects. In addition to training and networking with students across the region, students receive stipends of \$3,500 each upon completion of their project. See some of the projects we supported below and visit our website to view their video presentations.



ARIZONA

- Mi Cocina, Su Cocina: Implementing a Culinary Medicine Program in Southwestern Arizona
- Graham County Community Health Worker Program
- Exploring Mental Health Trends in Arizona School-Age Children Relative to School Closure and Home Confinement during the Covid-19 Pandemic
- Improving Undeserved LGBTQI+ Patient Healthcare Experiences in Federally Qualified Community Health Centers
- Fotonovela as a Pesticide Exposure Prevention Education Tool



CALIFORNIA

- Association Between Wildfire Disasters and Survival of Cancer Patients Undergoing Radiation
- ABCD Study Nagata Lab
- Preventing Homelessness in San Francisco
- 2023 UCSF-UC Berkeley Youth Participatory Action Research (YPAR)
 Summer Intern Program
- Social Epidemiology of Hypertension in the Adolescent Population
- Impact of Psychosocial Distress Screening in a Community-Based Cancer Center: A Retrospective Cohort Study



HAWAI'I & THE USAPI

• Kaukau 4 Keiki



NEVADA

- Nevada Health Equity Breast Cancer Needs Assessment
- Mental Health Among Adolescents: An Assessment and Proposal for Institutional Change
- Assessing perinatal T-DAP vaccination rates among pregnant people
- Nevada's Incarcerated Population; Health Status, Needs, and Future Health Assessment
- Building Bridges to Recovery: Mapping Out a Medication-Assisted Treatment Program for an FQHC
- Unmet Social Needs and Stress: An in-depth study in the state of Nevada

CHARACTERISTICS OF SUPPORTED STUDENTS

Ethnicity of Students

Hispanic/Latino		24%	
Non-His	panic/Non-Latino	76%	

Rural Residential Background

Yes	27%
No	73%

Disadvantaged Background

Yes	30%	
No		70%

Race of Students

White	63%
Asian	20%
Black/African American	7%
AI/AN	3%
Other/Not Reported	7%

STUDENT COMMENTS

I loved my project and felt so fulfilled working on it--it was truly a "dream internship" and it helped me solidify that this is the field/type of work I hope to do in the future.

It also opened up another opportunity for future work with the organization that I am planning to

participate in!

This project has been a valuable, applied compliment to my academic learning. I am coming away with a better understanding of the challenges of working with real-world data and the importance of not only studying health equity, but being very deliberate and thorough when choosing design and methods to study health equity. I have realized I have so much further to go in my journey as public health researcher, but am getting a better sense of what I would like to learn in the remainder of my program and the kinds of projects I would like to work on in my public health career beyond school. Thanks so much for this opportunity and support! "

The financial support made it possible to fully engage in my program without concern of financial losses as a low income student. The cohort connections and learning about others' projects also made me feel connected to other public health scholars throughout the western states.

I loved getting to hear from other public health students and learn about their projects - I think the poster presentation was my favorite part!

Talking with a PhD academic, who does publications and translates research and project implementation into articles was really useful to me.

Additionally, this project made me break down the needs assessment into core components and quickly convey it via poster-- which I think will make the report much stronger when I finish writing it.

LOOKING FORWARD

We are looking forward to continuing our work to assess training gaps and develop interactive, skill-based learning opportunities in our next project year. As we develop and deliver these training and learning resources, here are a few of the plans we'll be focusing on to improve and expand our services:



PROVIDING JOINT ACCREDITATION

After a rigorous application and review process, the WRPHTC has been accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC) to provide continuing education for the healthcare team through November 2025. In this coming project year, we are excited to expand our CE offerings to this wider range of health professions interested in interprofessional team building.



INCREASING ACCESSIBILITY

We have been working with our Disability Resource Center to review our website and trainings to ensure we are implementing best practices in accessible learning. We look forward to continuing to integrate improvements in our learning activities and design.



LAUNCHING OUR REGIONAL LEADERSHIP INSTITUTE

The PHTC network has been developing formal leadership programs for emerging leaders in public health and primary care, focused on building leadership skills, cross-sectoral partnerships, and improving health equity. Our inaugural Western Region Leadership Institute will run from January through April 2024 and consist of six virtual skill-building sessions with our identified experts.



MORE MICROTRAININGS & PODCASTS

We are continuing to develop trainings that meet the needs of a busy, growing, and changing public health workforce. This includes training formats that are more friendly to busy schedules and multitasking, like microtrainings and podcasts. Follow up on social media or sign up for our newsletter to get updates on newly released episodes and videos!

Reflecting on past accomplishments and opportunities for future growth, we are excited to continue to explore ways we can support the public health workforce of the mainland Southwest and the Pacific.