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XX Health Department Core Competency Self-assessment and Training Preferences Survey

Overview of Findings

2016



A Member of the Nation's Network of Public Health Training Centers

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Summary

This report presents findings from the Public Health Core Competency Self-assessment and Training Preferences (PHCCSTP) Survey administered to staff at the XXX XX Health Department. The PHCCSTP Survey is a tool for assessing the skill sets (competencies) and identifying the training needs of public health workers, and for supporting the workforce-development plans required for public health department accreditation. The Survey was administered via the Internet to XXX XX Health Department staff.

Public Health Competency Assessments

On average, Tier A respondents (Support Staff; n = XX) rated General Office Skills and Cultural Competency as their highest core competencies, with scores close to Proficient. They rated Understanding My Public Health Role and Understanding Program Policies as their lowest competencies—just above Competent. (Note: possible ratings were None/Very Little, Beginner/Aware, Competent, Proficient, and Expert.)

On average, Tier 1 respondents (Public Health Professionals; n = XX) rated Cultural Competency as their highest core competency—about midway between Competent and Proficient. The next two highest competencies, both rated on average as Competent, were Communication and Community Dimensions of Practice. Tier 1's lowest ratings were for Public Health Sciences and Financial Planning & Management, both were rated between Beginner/Aware and Competent.

On average, Tier 2 respondents' (Managers and Supervisors; n = XX) rated Cultural Competency and Leadership & Systems Thinking as their highest core competencies, with scores a little above Competent. Tier 2 respondents' lowest core competencies, rated Public Health Sciences and Financial Planning & Management as their lowest core competencies: the mean scores were approximately midway between Beginner/Aware and Competent.

On average, Tier 3 respondents' (Directors and Senior Leaders; n = XX) highest competency ratings were for Community Dimensions of Practice and for Communication—approximately midway between Competent and Proficient. The lowest ratings were for Analysis & Assessment and Public Health Sciences; both competencies were rated just above Competent. Of Tier groups 1, 2 and 3, Tier 3 generally had the highest ratings.

General Training Topics

Tier A (Support Staff) indicated that Client Confidentiality & HIPPA and Customer Service were the top two training topics “I need for my job”. The two top training topics they said “I would like to have” were Public Health 101 and Leadership Skills.

Tier 1 (Public Health Professionals) indicated that the two top training topics needed for their job were Client Confidentiality & HIPPA and Cultural Responsiveness. The two top training topics selected as “I would like to have” were Leadership Skills and Public Health 101, the same as those selected by Tier A.

Tier 2 (Managers and Supervisors) indicated that the two top training topics needed for their job were Effective Project Management and Improving Program Outcomes & Measures. The two top training topics “I would like to have” were Public Health Preparedness Expectations and Community Mobilization & Engagement.

Tier 3 (Directors and Senior Leaders) respondents indicated that the two top training topics needed for their job were Quality Improvement and Improving Program Outcomes & Measures. The two top training topics “I would like to have” were Trainings in Conflict Management & Leadership Skills.

When Tier 2 and 3 respondents were asked which training topics were most needed for their employees, the top 4 topics selected were Conflict Management, Customer Service, Cultural Responsiveness and Client Confidentiality & HIPPA.

Computer/Software Training Topics

All 4 Tiers indicated that Microsoft Office was the top computer/software training topic needed for their job, although for Tier 3, Microsoft Office tied with Share Point for the top pick. For Tier A and Tier 1, the second computer/software training topics most often selected were Access and Survey Monkey, respectively. For Tier 2, Survey Monkey, Access and Share Point all tied as the second computer/software training most often selected. For Tier 3, Literature Reviews & Web Searches and Managing References were the top picks most often selected following Microsoft Office and Share Point.

Preferred Training Format

The top preferred format for training was On-site Training in Your Workplace. Preferences were also expressed for trainings that offered Continuing Education Credit and for Computer-Based/Webinar trainings that included interactions with instructors.

INTRODUCTION

This report presents findings from the Western Region Public Health Training Center's (WRPHTC) Public Health Core Competency Self-assessment and Training Preferences Survey recently administered to staff at the XXX XX Health Department. It begins with an outline of the survey's purpose and the methodology used to develop, implement and analyze the survey.

Background

Identifying the training needs of the public health workforce is essential. The public health setting is changing at a rapid pace and the workforce needs to keep abreast of current methods used to safeguard communities. Moreover, many professionals in the public health workforce were not formally trained to work in this sector; identifying and meeting their training needs is consequently critical to ensuring public health program effectiveness.

The Public Health Foundation has identified eight public health workforce core competencies (<http://www.phf.org/programs/corecompetencies>) that public health professionals need as they work to protect and improve the nation's health: 1) Cultural Competency, 2) Communication, 3) Community Dimensions of Practice, 4) Analysis and Assessment, 5) Public Health Sciences, 6) Financial Planning and Management, 7) Policy Development/Program Planning, and 8) Leadership and Systems Thinking. These competencies are used in the (WRPHTC) Public Health Core Competency Self-assessment and Training Preferences Survey as a framework for helping to assess the skill levels and training needs of public health staff.

The Public Health Foundation's eight core competencies were designed for public health professionals at three different levels: Tier 1 (Public Health Professionals), Tier 2 (Managers and Supervisors), and Tier 3 (Directors and Senior Leaders). Each Tier is expected to have a certain level of expertise for the eight competencies, but the extent to which each tier has those competencies is graduated, with the highest expectations for Tier 3.

Another tier not yet fully addressed by the Public Health Foundation's core competency framework is public health workers who function as support staff. Partners collaborating with WRPHTC on the administration of needs assessments have developed an additional set of competencies for this staff, which is called Tier A in the present report. These competencies are 1) Cultural Competency, 2) Client/Customer Interactions, 3) Knowledge of Community Resources, 4) General Office Skills, 5) Data/Information Processing, 6) Understanding My Public Health Role, 7) Understanding Program Policies, 8) Understanding Health Department Function, and 9) Supporting Health Department Vision.

In addition to helping with identifying skill sets and training needs for the purpose of improving the quality of the public health workforce, assessing core competencies plays an important role in the process of public health department accreditation. The Public Health Accreditation Board (PHAB) defines public health department accreditation as "the development of a set of standards,

a process to measure health department performance against those standards, and reward or recognition for those health departments who meet the standards” (<http://www.phaboard.org/accreditation-overview/what-is-accreditation/>). PHAB has developed Standards and Measures to use in the process for accreditation. One standard in particular relates to the survey discussed in this report. PHAB Measure 8.2.1 states that public health departments should “maintain, implement and assess the health department workforce development plan that addresses the training needs of the staff and the development of core competencies. The purpose of this measure is to assess the health department’s planning for employee training, implementation of those plans, and the development of core competencies” (<http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf>).

To augment the assessment of core competencies, the Survey also measures staff preferences on training topics, including format and delivery.

In summary, the Public Health Core Competency Self-assessment and Training Preferences Survey, developed in light of the Public Health Foundation’s core competencies, is a tool for assessing the skill sets and identifying the training needs of public health workers, and for supporting the workforce-development plans required for public health department accreditation.

Methods

All XXX XX Health Department staff were invited to participate in the survey. The survey was administered via the Internet using Qualtrics (a web-based survey system). The survey instructions and questions given to respondents are presented in Appendix A. At the beginning of the survey all respondents were asked questions about their worksite, educational background, job description and training preferences. Based on the job description each respondent selected, he/she was automatically assigned to a Tier level and provided with core competency questions specific to that assigned level.

The Training Preferences section of the survey assessed preferences in training topic, format and delivery. For the administration of the survey, the WRPHTC worked with the XXX XX Health Department to ensure an encompassing list of training topics. Respondents were asked to indicate which of many topics they would be personally interested in and which were important to their job. In addition, anyone who indicated they had a supervisory role (identified via their job description) was also asked to indicate which of the topics were important to their staff.

As noted earlier, the Public Health Foundation has identified core competencies for public health workers in Tiers 1, 2 and 3. The Kentucky Department of Public Health, in collaboration with the University of Kentucky and the Kentucky Public Health Training Center, developed a questionnaire that asks workers to rate their skills sets per the Public Health Foundation’s core competencies. With permission from the Kentucky Department of Public Health, a version the

questionnaire (slightly modified) was incorporated into the WRPHTC Public Health Core Competency Self-assessment and Training Preferences Survey.

Each core competency was assessed with multiple questions (Appendix A). For each of these questions, a respondent rated his/her skill level as 1 = None/Very Little, 2= Beginner/Aware, 3 = Competent, 4 = Proficient, or 5=Expert. The multiple questions for an individual competency were combined (e.g., averaged) to form an overall score for the competency.

Survey administration timeline and response

- 1) Survey launch: On [date] employees at the XXX XX Health Department were emailed an invitation to complete the survey from the XXX XX Health Department leadership team containing a link to the web-based survey.
- 2) The leadership team at the XXX XX Health Department sent follow-up reminder emails alerting personnel to complete the survey.
- 3) Respondents were asked to complete the survey by [date].
- 4) XX employees initiated the survey.
- 5) XX Tier A, XX Tier 1, XX Tier 2, and XX Tier 3 employees (altogether XX employees) completed the survey questions on core competencies.
- 6) The survey was closed at the end of the day on [date].

The WRPHTC staff was in contact with the XXX XX Health Department staff to answer questions and to provide updates on completion and survey progress.

Confidentiality

Competency and training needs measures/variables are presented only when there were at least five respondents for a measure/variable. Participants were informed that any information they provided was voluntary and strictly confidential and would not be used for rating job performance.

SURVEY FINDINGS

Characteristics of the Health Department sample

The survey was initiated by 205 employees. The degree most commonly held by the respondents was the AA (Table 1). Bachelors and Masters were the second most commonly reported degrees. Degrees. Numerous certifications and licenses were reported: these included Behavioral Health Technician, Breastfeeding Counselor, Chemical Dependency Specialist, CNA/Nursing Assistant, Community Health, Dental Assistant, Exercise Specialist, Fitness Trainer, Health Information Technology, ISSA, LCSW, LMSW, LPN, Medical Administrative Assistance, Medical Assistant, Medical Billing and Coding, Medical Records, Nutrition Worker, Pharmacy Technician, Phlebotomy Technician, Sports Medicine Assistant, Workforce Development, Workforce Management, Workplace Development.

Table 1. Respondents' Degrees

| Degrees | Frequency |
|-------------------------------|-----------|
| AA | 31 |
| AS | 6 |
| BA | 17 |
| BS | 17 |
| BSW | 3 |
| MSW | 12 |
| MA | 17 |
| MS | 3 |
| MBA | 4 |
| M Ed | 2 |
| MC/MS* | 5 |
| MHA | 1 |
| MPA | 1 |
| MPH | 2 |
| MD | 3 |
| PhD | 4 |
| RD | 1 |
| RN | 8 |
| CNM | 1 |
| DDS | 2 |
| Naturopathic Medicine, Doctor | 1 |

Note. Respondents could report more than one degree.

*Masters of Counseling/Masters of Science Community Counseling.

XXX XX Health Department Divisions reported by 5 or more respondents are listed in Table 2.

Table 2. Divisions/Programs Where Respondents Work

| Division/Program | Frequency |
|-----------------------------------|------------------|
| Division A | 56 |
| Division B | 26 |
| Community Health Nursing | 24 |
| Diabetes Program | 17 |
| Dental | 13 |
| Division C | 12 |
| Home and Community Based Services | 9 |
| Administration | 7 |
| Health Information Management | 6 |
| Division D | 6 |
| Other | 29 |

Tier 1 employees (Public Health Professionals) constituted the largest group of respondents followed by Tier A employees (Support Staff) (Table 3).

Table 3: Employees by tier

| Reported Tier | Frequency | % |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------|
| Tier A (Support Staff): Front line staff including receptionists, call-center and support staff who interact with the public but who do not provide direct public health programming or services. Responsibilities may include referring callers to appropriate services or departments and scheduling or checking in clients for appointments. Example: OSL, Admin. Support. | 51 | 24.9% |
| Tier 1 (Public Health Professionals): Individuals who carry out the day-to-day tasks of public health organizations and are not in supervisor positions. Responsibilities of these public health professionals may include basic data collection and analysis, clinical services, fieldwork, program planning, outreach activities, programmatic support, and other organizational tasks. | 118 | 57.6% |
| Tier 2 (Managers and Supervisors): Individuals with program management and/or supervisory responsibilities. Other responsibilities may include: program development, program implementation, program evaluation, establishing and maintaining community relations, managing timelines and work plans, presenting arguments and recommendations on policy issues etc. | 26 | 12.7% |
| Tier 3 (Directors and Senior Leaders): Individuals at a senior/management level and leaders of public health organizations. In general, an individual who is responsible for the major programs or functions of an organization, setting a strategy and vision for the organization, and/or building the organization’s culture. | 10 | 4.9% |
| Total | 205 | 100% |

Note that 199 of the 205 respondents completed the survey’s questions on core competencies (see n’s in the following figures and tables on core competencies).

Core Competencies

Core competency self-assessments by domain

Tier A employees rated General Office Skills as their top competency (Table 4). Their lowest rating was for Understanding Program Policies.

Table 4. Competency Assessment for Tier A (Support Staff) by Domain: Mean Self-Rating Scores

| Competency Domain | Tier A (n = 48) |
|----------------------------------------------------|-----------------|
| | Mean (SD) |
| Social/Personal Skills | |
| Cultural Competency | 3.83 (0.75) |
| Client/Customer Interactions | 3.33 (0.77) |
| Community Relations | |
| Knowledge of Community Resources | 3.35 (0.87) |
| Technical Skills | |
| General Office Skills | 3.88 (0.79) |
| Data/Information Processing | 3.72 (0.82) |
| Departmental Congruence & Understanding | |
| Understanding My Public Health Role | 3.26 (0.88) |
| Understanding Program Policies | 3.24 (0.94) |
| Understanding Health Department Function | 3.53 (0.85) |
| Supporting Health Department Vision | 3.56 (0.96) |

Note. Each competency was rated with multiple questions. The possible response rating for each question was: 1-None/Very Little, 2-Beginner/Aware, 3-Competent, 4-Proficient, 5-Expert. The Mean score for a specific competency is the average score for all persons in the Tier (across all of the questions used to assess a competency).

Tier 1 employees rated Cultural Competency as their highest competency; their lowest ratings were for Public Health Sciences & Management and for Financial Planning and Management (Table 5). Similarly, Tier 2 employees also rated Cultural Competency as their highest competency, and their lowest ratings were for Financial Planning and Management and for Public Health Sciences. Tier 3 employees rated Community Dimensions of Practice as their highest competency and Public Health Sciences as their lowest.

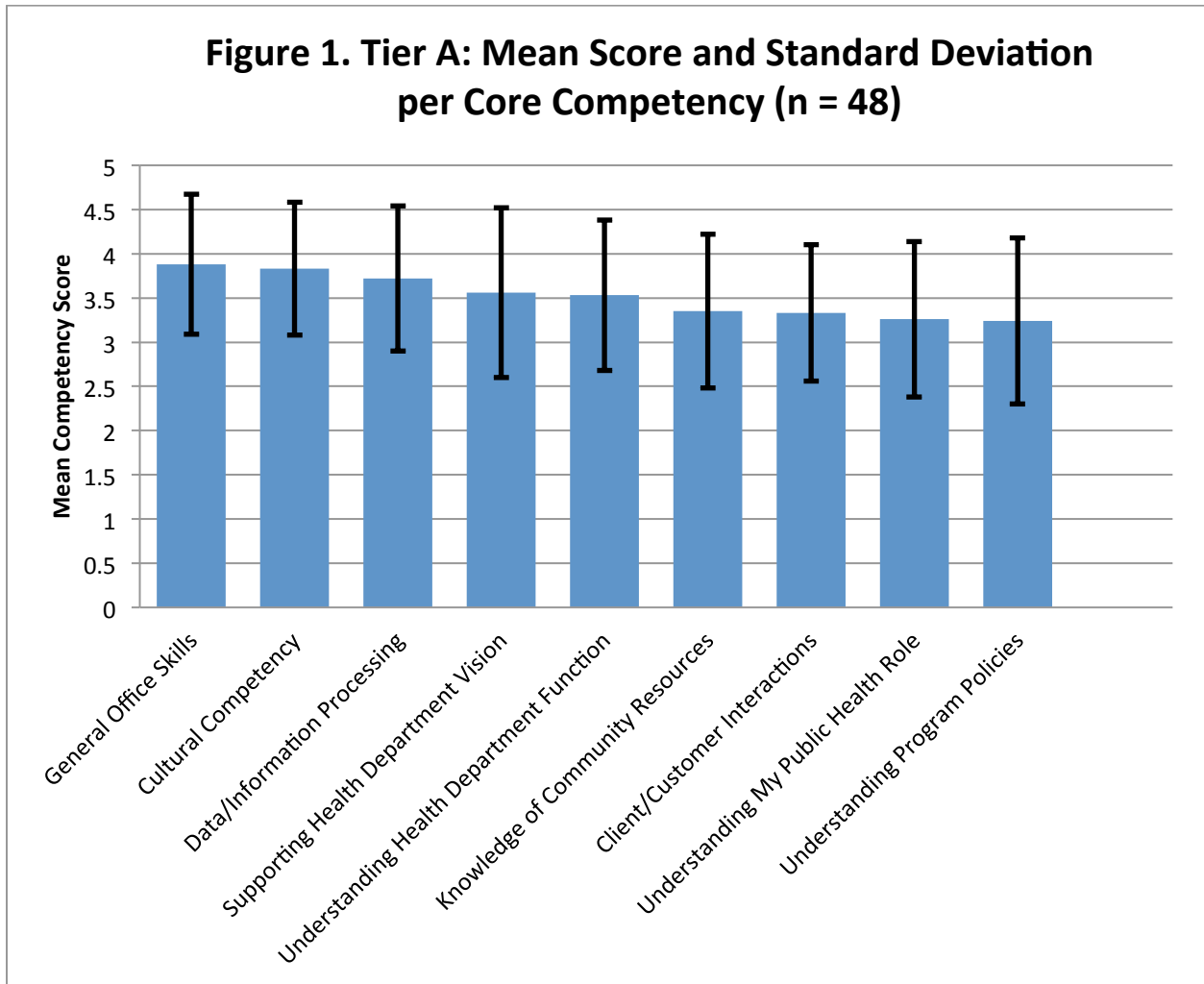
Table 5. Competency Assessment for Tiers 1, 2 and 3 by Domain: Mean Self-Ratings

| Competency Domain | Tier 1 (n=116) | Tier 2 (n=25) | Tier 3 (n=10) |
|--------------------------------------|-------------------|------------------|------------------|
| | Mean (SD) | Mean (SD) | Mean (SD) |
| Social/Personal Skills | | | |
| Cultural Competency | 3.43 (0.90) | 3.25 (0.85) | 3.50 (0.71) |
| Communication | 3.06 (0.73) | 3.10 (0.71) | 3.58 (0.92) |
| Community Relations | | | |
| Community Dimensions of Practice | 2.99 (0.86) | 3.11 (0.89) | 3.60 (0.93) |
| Analysis & Science | | | |
| Analysis and Assessment | 2.62 (0.93) | 2.65 (0.96) | 3.22 (1.03) |
| Public Health Sciences | 2.29 (0.85) | 2.43 (0.86) | 3.10 (0.74) |
| Finance | | | |
| Financial Planning and Management | 2.25 (0.87) | 2.58 (0.90) | 3.29 (1.02) |
| Policy & Systems | | | |
| Policy Development/ Program Planning | 2.63 (0.91) | 2.73 (0.86) | 3.43 (0.81) |
| Leadership and Systems Thinking | 2.70 (0.98) | 3.15 (0.91) | 3.54 (1.03) |

Note. Each competency was rated with 4 to 15 separate questions. The possible response rating for each question was: 1-None/Very Little, 2-Beginner/Aware, 3-Competent, 4-Proficient, 5-Expert. The Mean score for a Tier on a specific competency is the average score for all persons in the Tier (across all of the questions used to assess a competency).

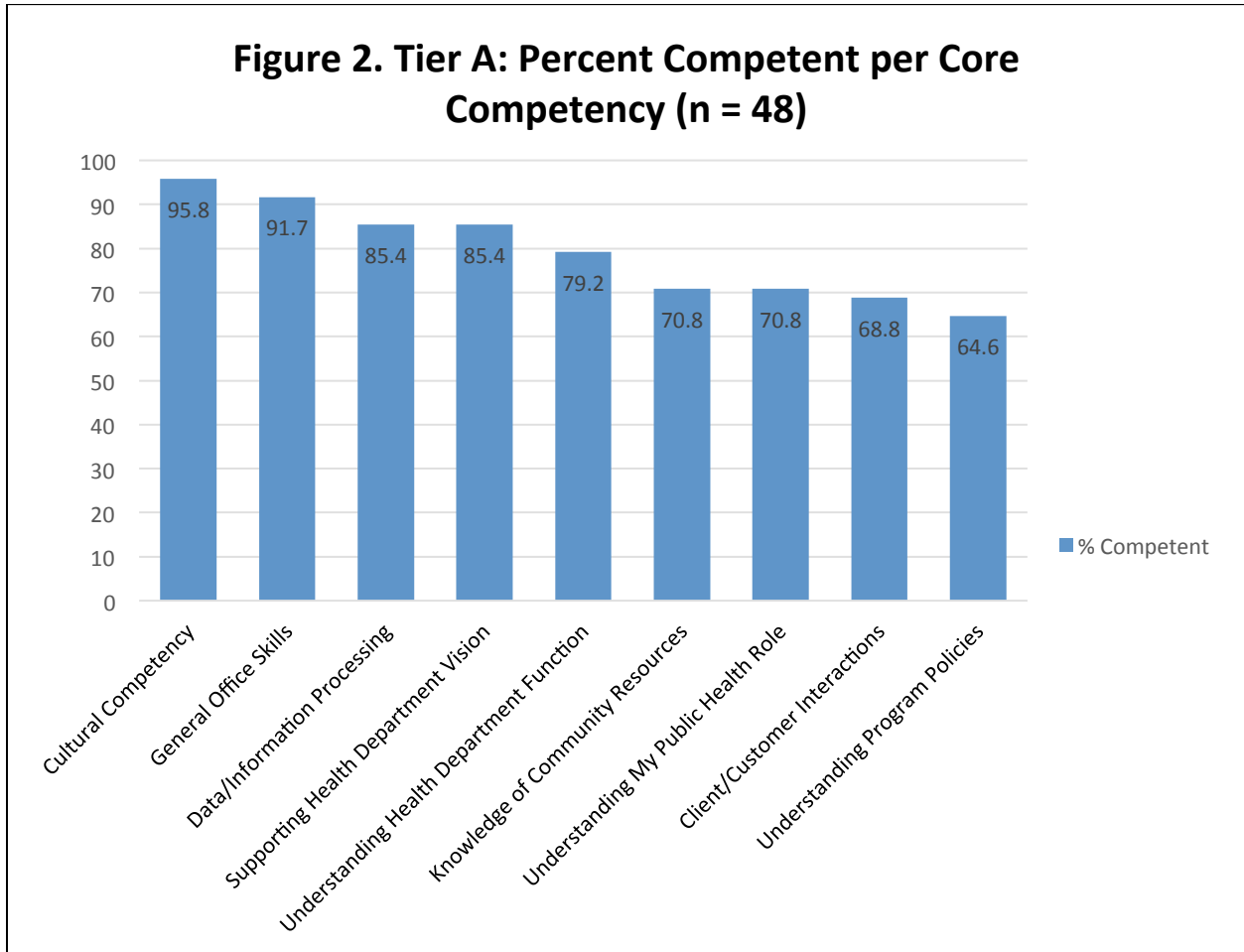
Core Competency Self-assessments: Tier A (Support Staff)

Tier A mean competency scores ranged from 3.88 (between Competent and Proficient) for General Office Skills to 3.24 (also between Competent and Proficient) for Understanding Program Policies (Figure 1). The standard deviations (an indicator of variance in ratings; represented in the Figure by the vertical lines) ranged from 0.75 for Cultural Competency to 0.96 for Supporting Health Department Vision.



Note. Each competency was rated with multiple questions. The possible response rating for each question was: 1-None/Very Little, 2-Beginner/Aware, 3-Competent, 4-Proficient, 5-Expert. The Mean score for a specific competency is the average score for all persons in the Tier (across all of the questions used to assess a competency).

Ninety-six percent of the Tier A staff rated themselves as competent or above regarding Cultural Competency (Figure 2). In contrast, only 64.6% scored such competency for Understanding Program Policies.

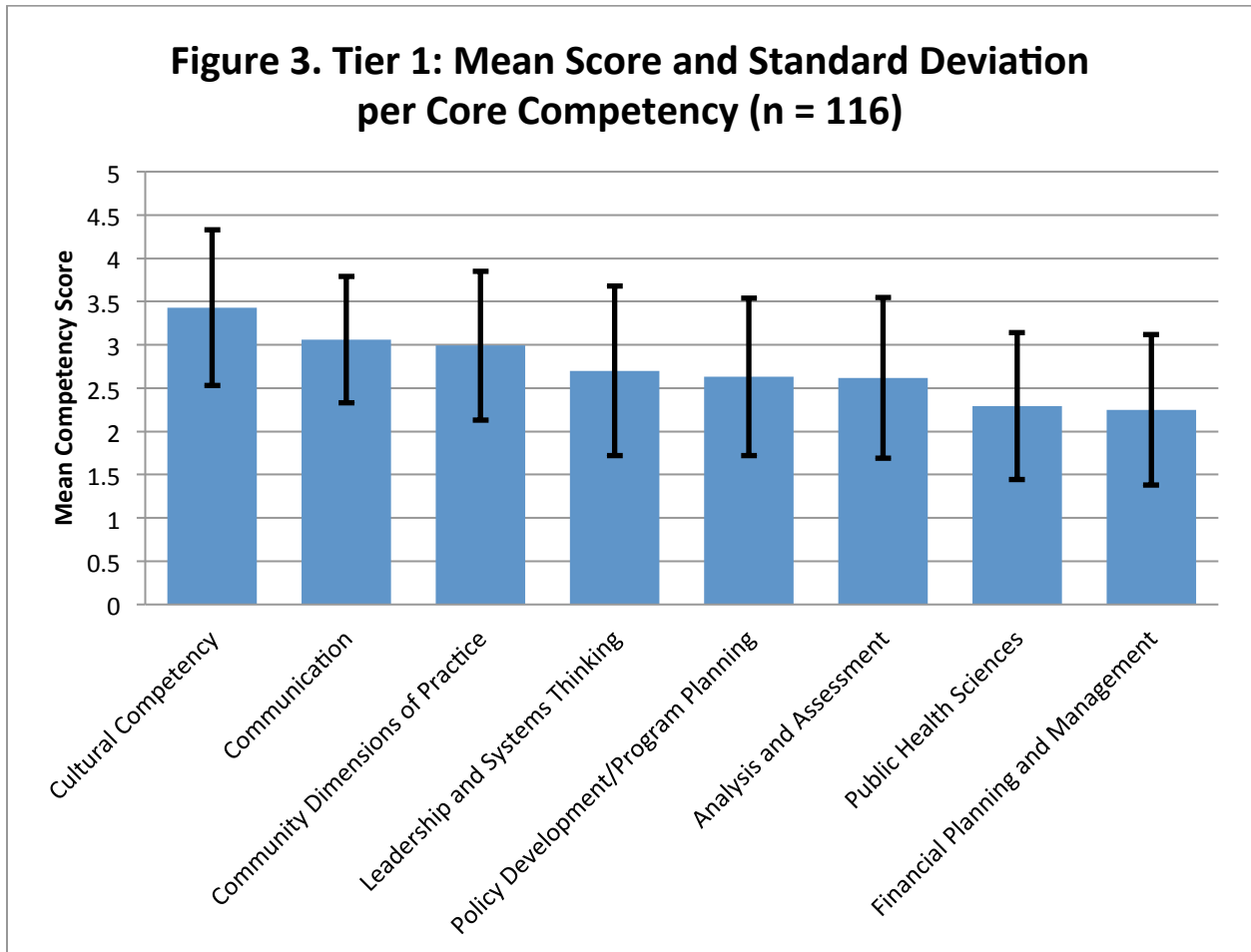


Note. Each competency was rated with multiple questions. The possible response rating for each question was: 1-None/Very Little, 2-Beginner/Aware, 3-Competent, 4-Proficient, 5-Expert. When a respondent's average score for a competency was 3 or higher, the respondent was counted as being competent for that competency. When a respondent's average score for a competency was below 3, the respondent was counted as not being competent for that competency.

The ranking of core competencies (from highest to lowest) according to percent competent was similar to the rankings shown for mean scores. Cultural Competency and General Office Skills had the highest mean competency scores ranking, while Understanding Program Policies had both the lowest mean score ranking and lowest percent competent ranking (Figures 1 and 2).

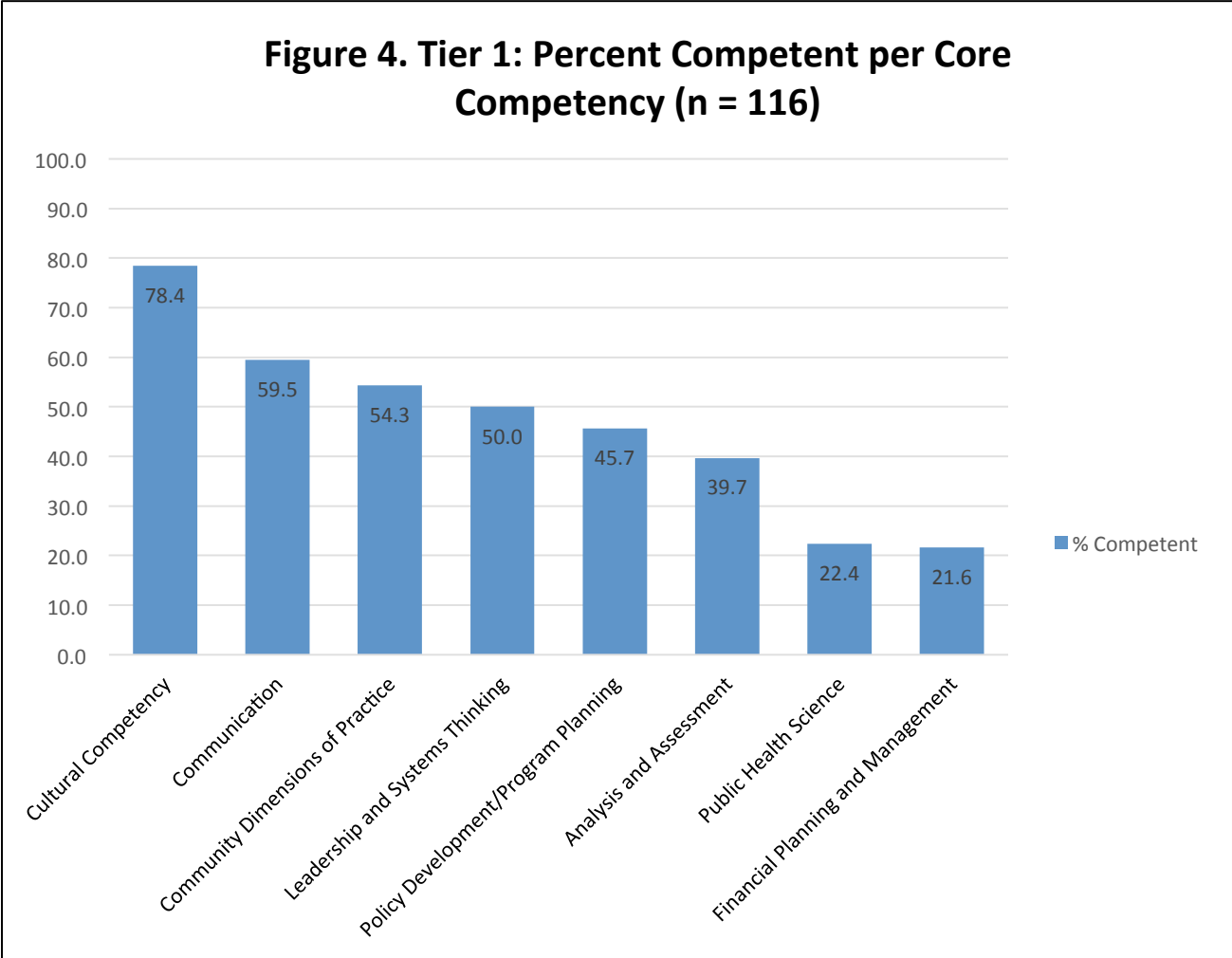
Core Competency Self-assessments: Tier 1 (Public Health Professionals)

The mean competency scores for Tier 1 ranged from 3.43 (between Competent and Proficient) for Cultural Competency to 2.25 (between Beginner/Aware and Competent) for Financial Planning and Management (Figure 3). The standard deviations ranged from 0.73 for the Communication to 0.98 for Leadership and Systems Thinking.



Note. Each competency was rated with 4 to 15 separate questions. The possible response rating for each question was: 1-None/Very Little, 2-Beginner/Aware, 3-Competent, 4-Proficient, 5-Expert. The Mean score for a specific competency is the average score for all persons in the Tier (across all of the questions used to assess a competency).

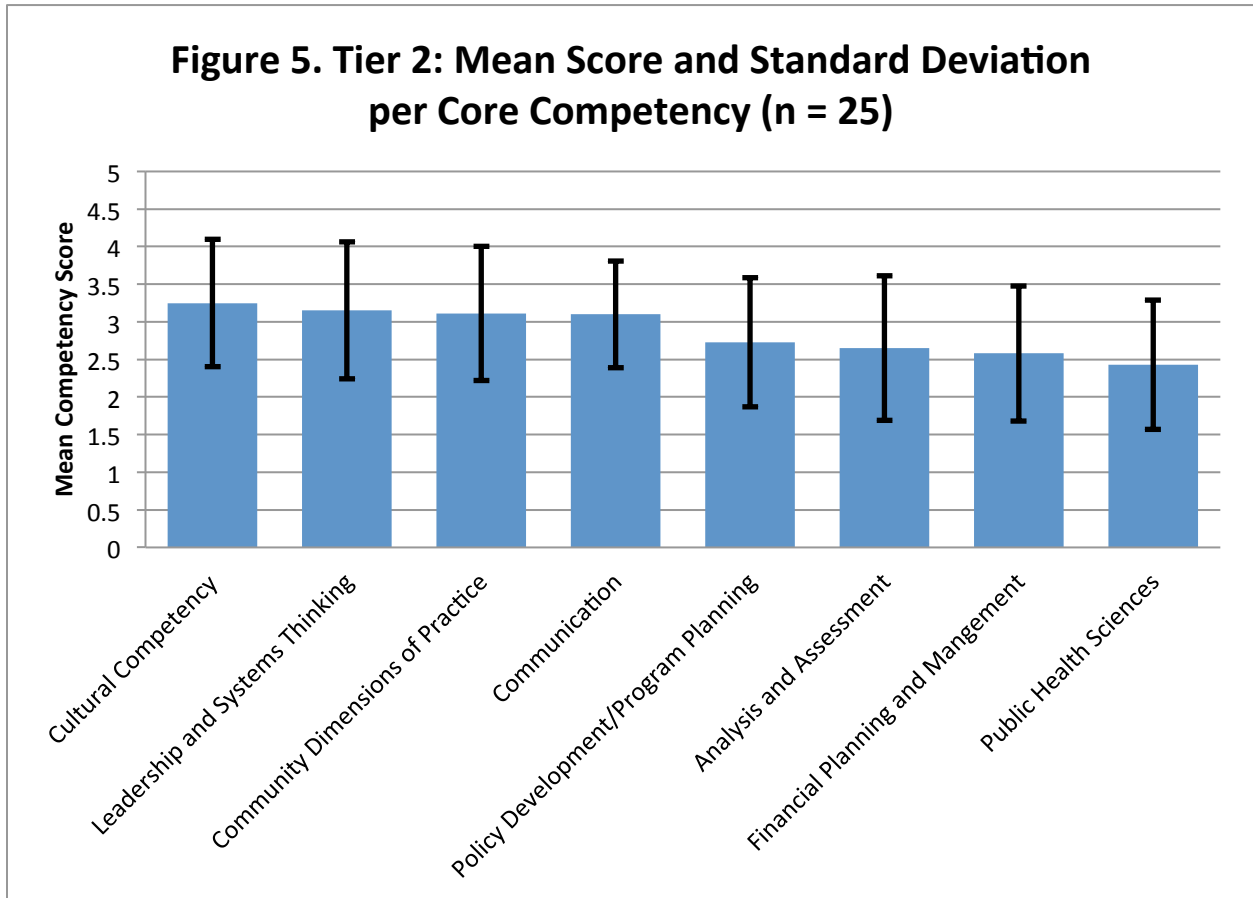
Seventy-eight percent of the Tier 1 staff scored (themselves) as competent or above regarding Cultural Competency (Figure 4). Only 21.6% scored such competency for Financial Planning and Management.



Note. Each competency was rated with 4 to 15 separate questions. The possible response rating for each question was: 1-None/Very Little, 2-Beginner/Aware, 3-Competent, 4-Proficient, 5-Expert. When a respondent's average score for a competency was 3 or higher, the respondent was counted as being competent for that competency. When a respondent's average score for a competency was below 3, the respondent was counted as not being competent for that competency.

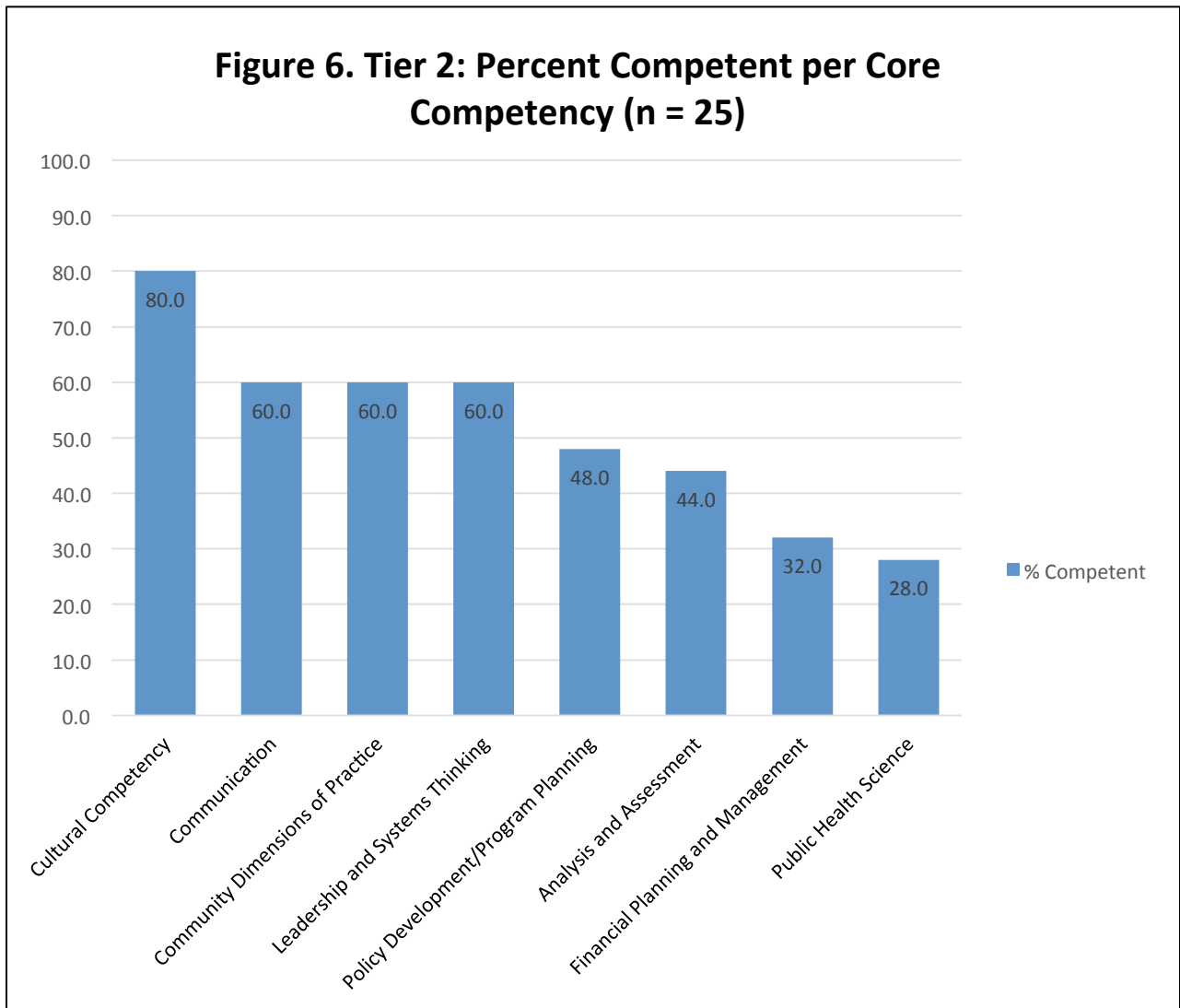
Core Competency Self-assessments: Tier 2 (Managers and Supervisors)

The mean competency scores for Tier 2 ranged from 3.25 for Cultural Competency to 2.43 for Public Health Sciences (Figure 5). The standard deviations ranged from 0.71 for Communication to 0.96 for Analysis and Assessment.



Note. Each competency was rated with 4 to 15 separate questions. The possible response rating for each question was: 1-None/Very Little, 2-Beginner/Aware, 3-Competent, 4-Proficient, 5-Expert. The Mean score for a specific competency is the average score for all persons in the Tier (across all of the questions used to assess a competency).

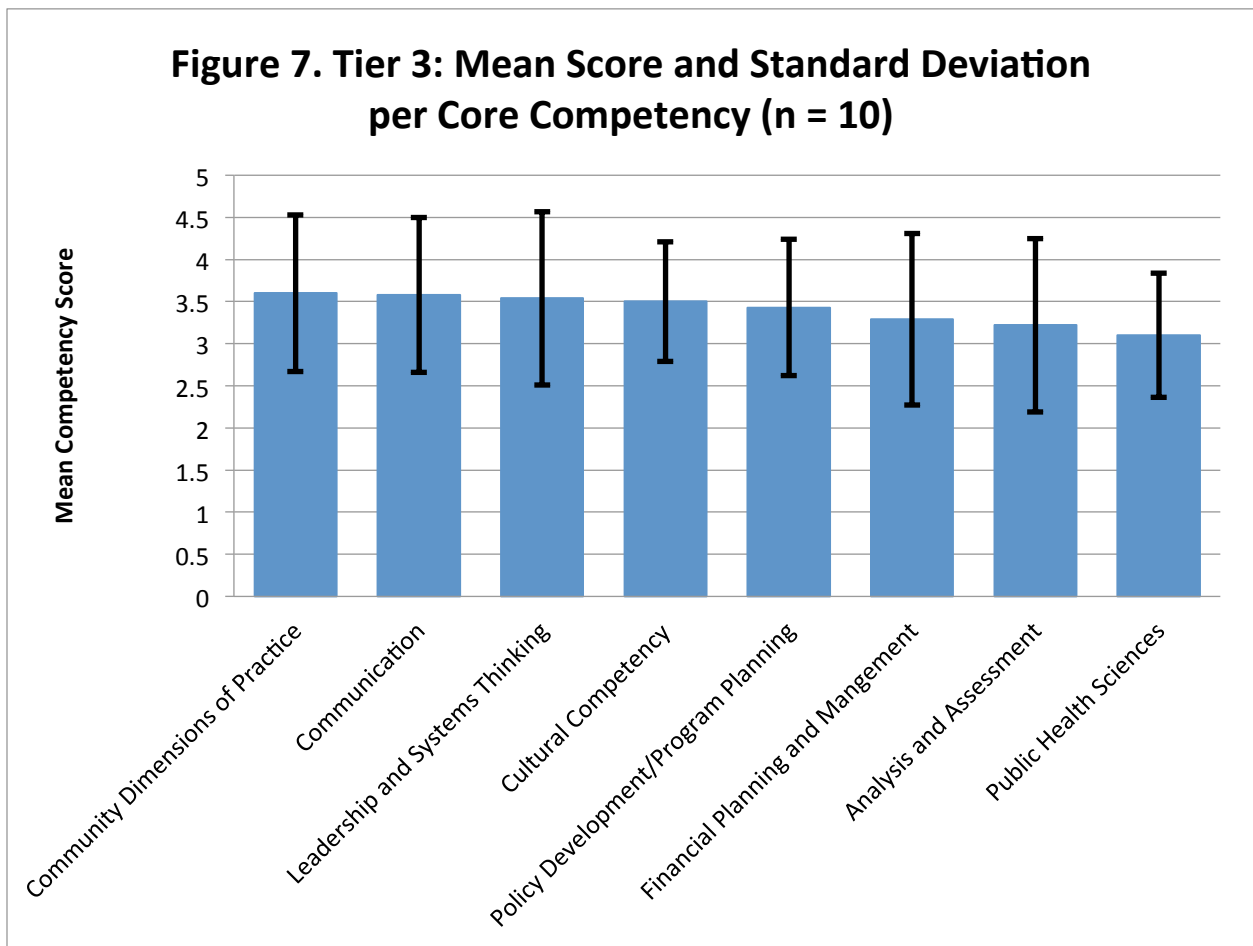
Eighty percent of the Tier 2 staff scored (themselves) as competent or above regarding Cultural Competency (Figure 6). Only 28% scored such competency for Public Health Sciences.



Note. Each competency was rated with 4 to 15 separate questions. The possible response rating for each question was: 1-None/Very Little, 2-Beginner/Aware, 3-Competent, 4-Proficient, 5-Expert. When a respondent's average score for a competency was 3 or higher, the respondent was counted as being competent for that competency. When a respondent's average score for a competency was below 3, the respondent was counted as not being competent for that competency.

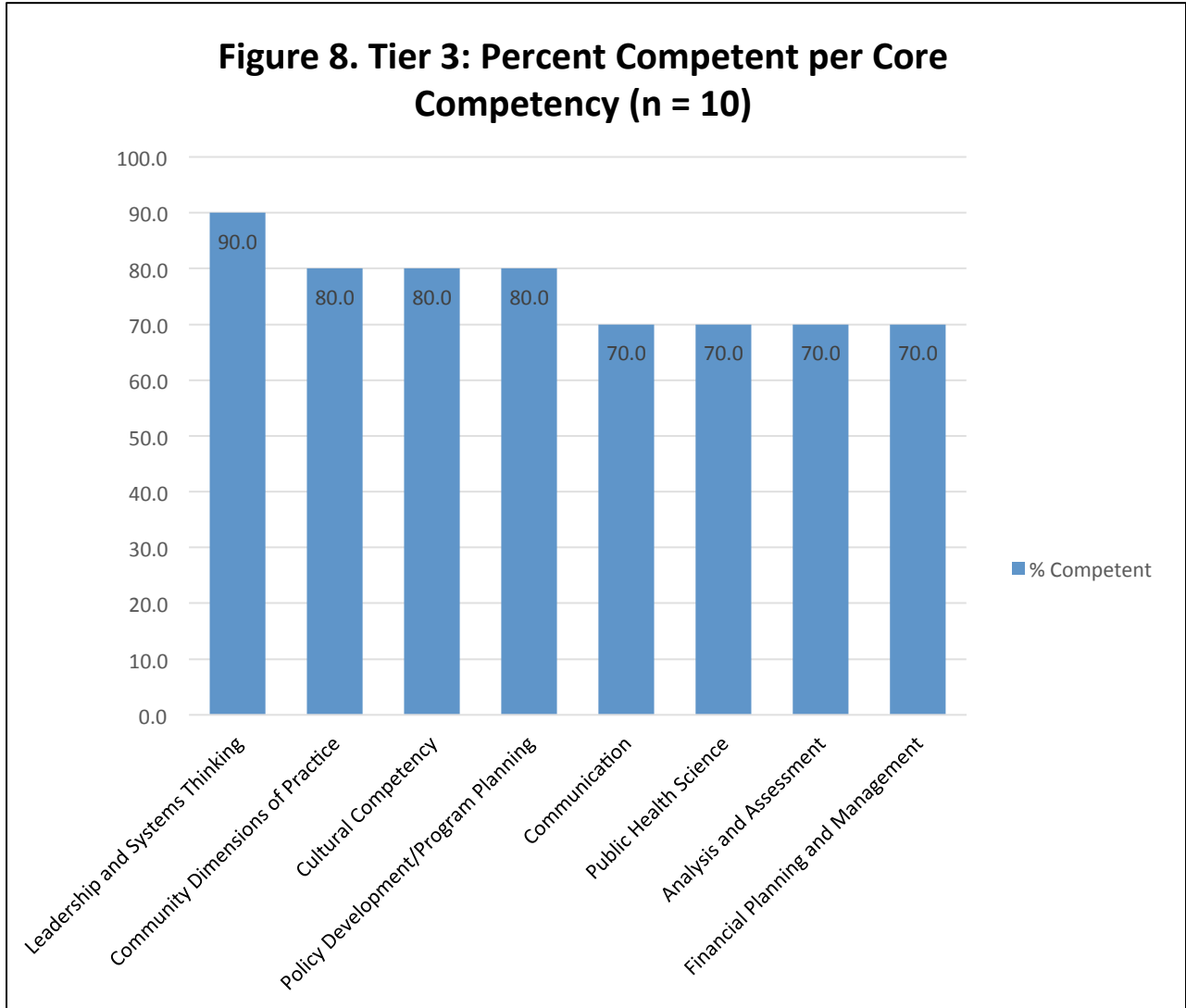
Core Competency Self-assessments: Tier 3 (Directors and Senior Leaders)

The mean competency scores for Tier 3 ranged from 3.60 for Community Dimensions of Practice to 3.10 for Public Health Sciences (Figure 7). The standard deviations ranged from 0.71 for Cultural Competency to 1.03 for both Leadership & Systems Thinking, and Analysis & Assessment.



Note. Each competency was rated with 4 to 15 separate questions. The possible response rating for each question was: 1-None/Very Little, 2-Beginner/Aware, 3-Competent, 4-Proficient, 5-Expert. The Mean score for a specific competency is the average score for all persons in the Tier (across all of the questions used to assess a competency).

Ninety percent (90%) of the Tier 3 staff scored (themselves) as competent or above regarding Leadership and Systems Thinking, and 70-80% scored (themselves) as competent or above regarding the other 7 core competencies (Figure 8).

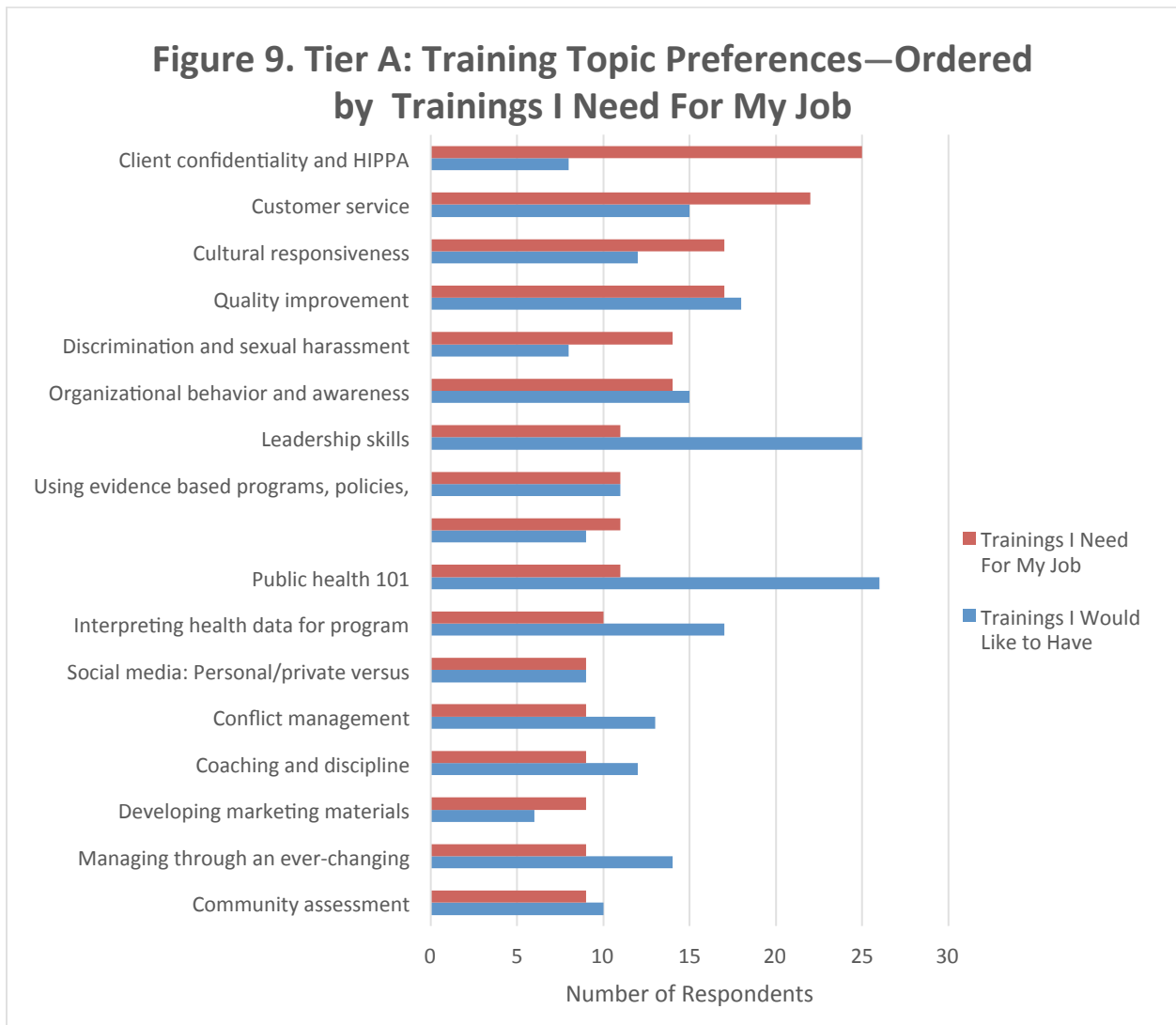


Note. Each competency was rated with 4 to 15 separate questions. The possible response rating for each question was: 1-None/Very Little, 2-Beginner/Aware, 3-Competent, 4-Proficient, 5-Expert. When a respondent's average score for a competency was 3 or higher, the respondent was counted as being competent for that competency. When a respondent's average score for a competency was below 3, the respondent was counted as not being competent for that competency.

Training Topics

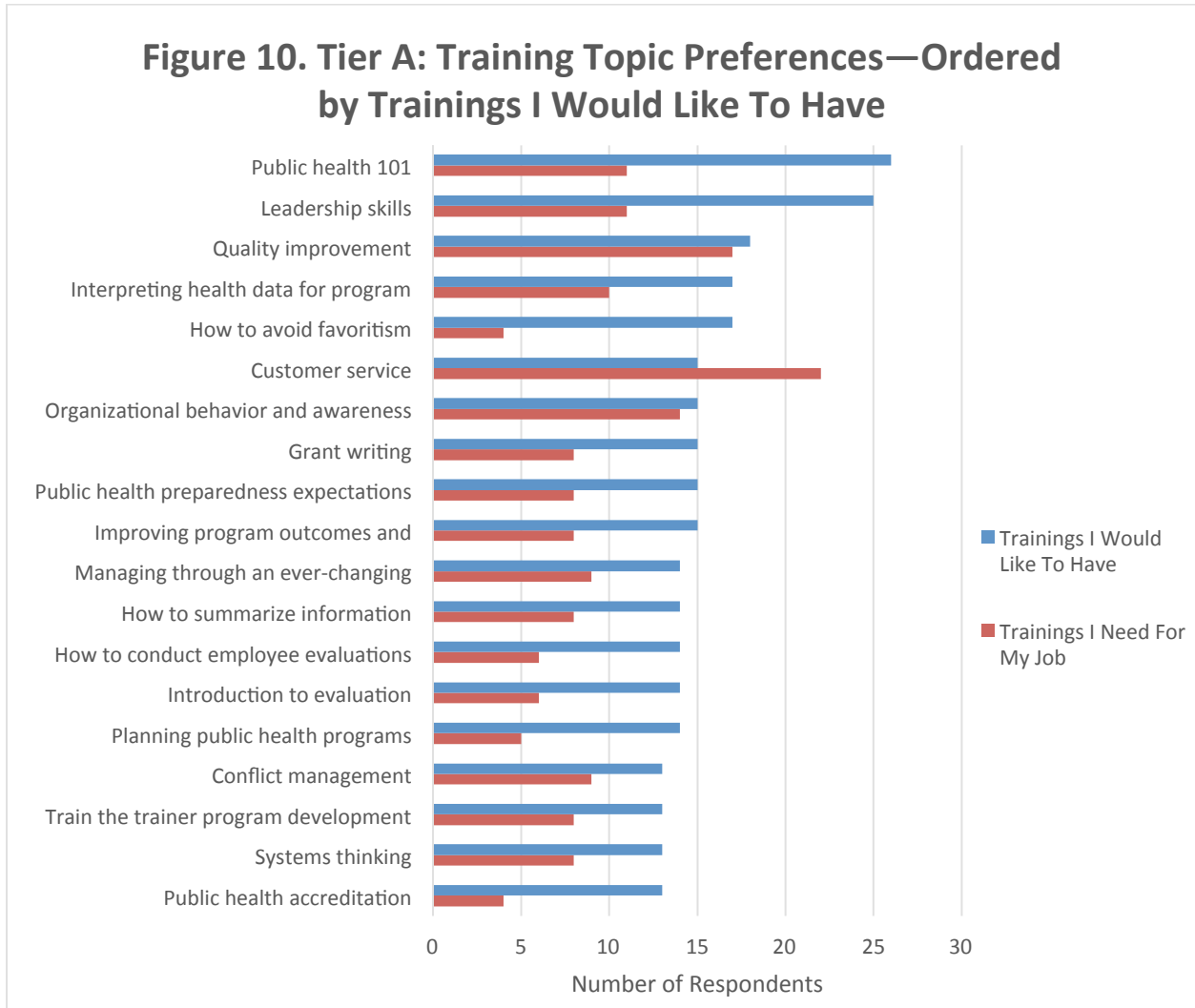
Training Topics Selected (exclusive of Computer Program/Software Training)

Respondents were asked to identify training topics (i.e. topics exclusive of computer program/software training) that they needed for their job, as well as topics that they would like to have. (Computer/software training is addressed on p. 30.) For Tier A, the trainings “needed for my job” are ordered according to frequency of selection (Figure 9). The two trainings selected most were Client confidentiality & HIPPA and Customer service. Counts of Tier A respondents who said they “would like to have” the trainings in Figure 9 are also shown (see blue bars).



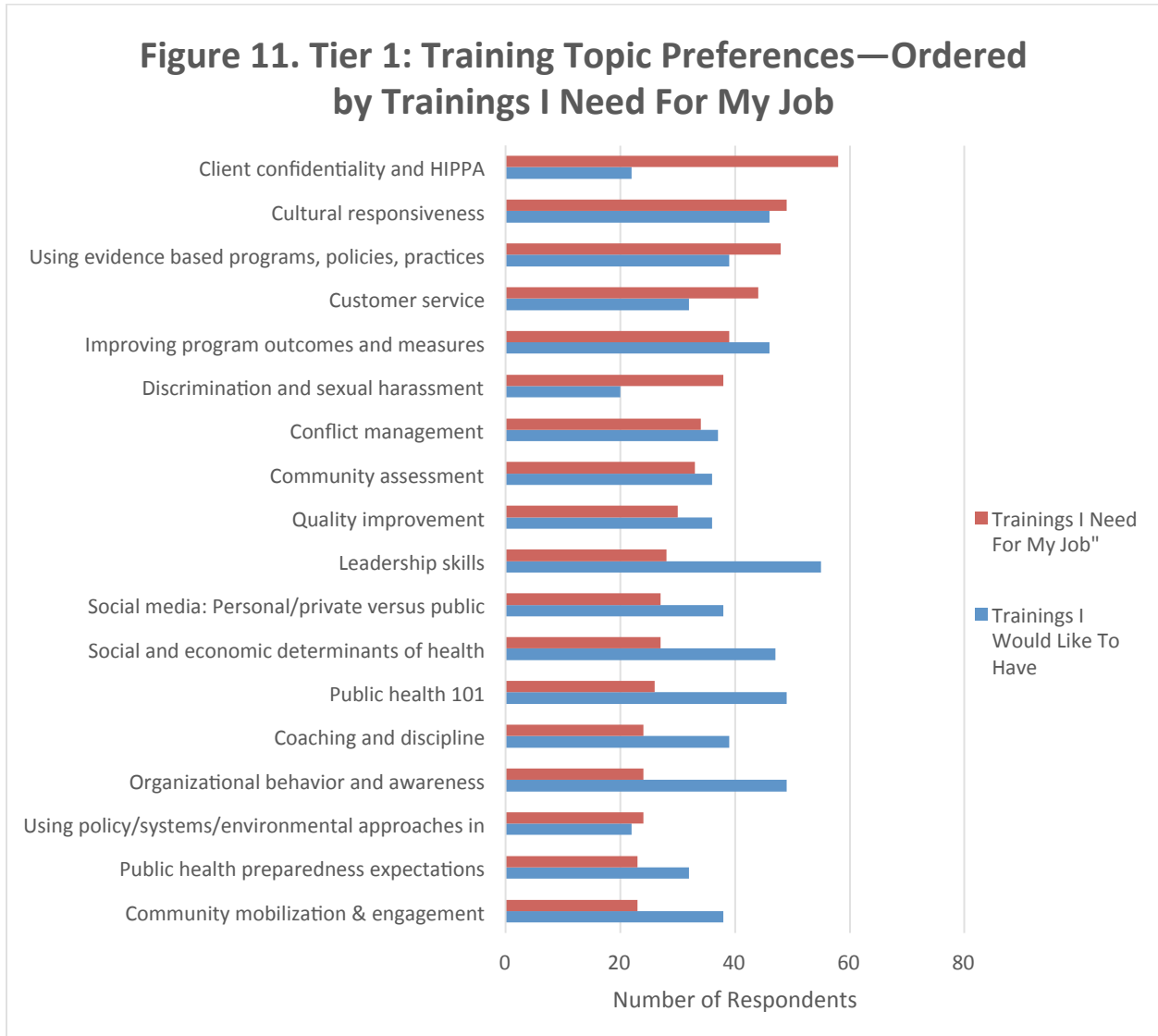
Note. For my job, 8 Tier A respondents also selected: How to access and interpret web-based data; Improving program outcomes and measures; Effective project management; Public health preparedness expectations; Systems thinking; Train the trainer program development; How to summarize information effectively—Mastering the art of the one-page summary; and Grant writing.

Continuing with Tier A, general trainings ordered according to “I would like to have” are shown in Figure 10. The two trainings selected the most were Public health 101 and Leadership skills. Counts of Tier A respondents who said the trainings in Figure 9 would be needed for their job are also shown (see red bars).



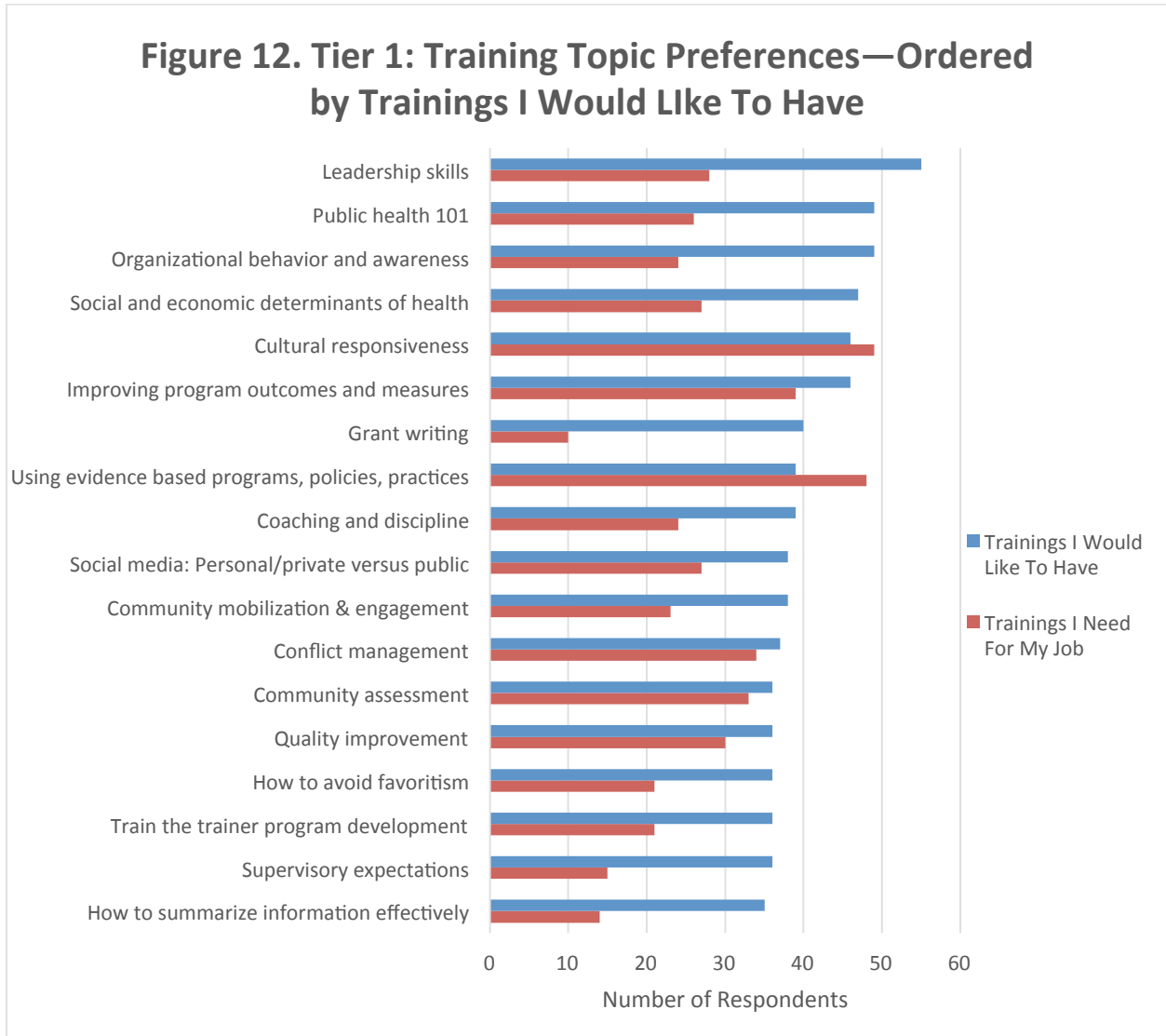
Note. Twelve Tier A respondents reported that they would like to have trainings on the topics of Social and economic determinates of health, Coaching and discipline, and Cultural awareness.

For Tier 1, the top general trainings ordered by how frequently they were selected as “being needed for the job” are shown in Figure 11. The two trainings selected the most were Client confidentiality & HIPPA and Cultural responsiveness. Counts of Tier 1 respondents who said they “would like to have” the trainings in Figure 11 are also shown (see blue bars).



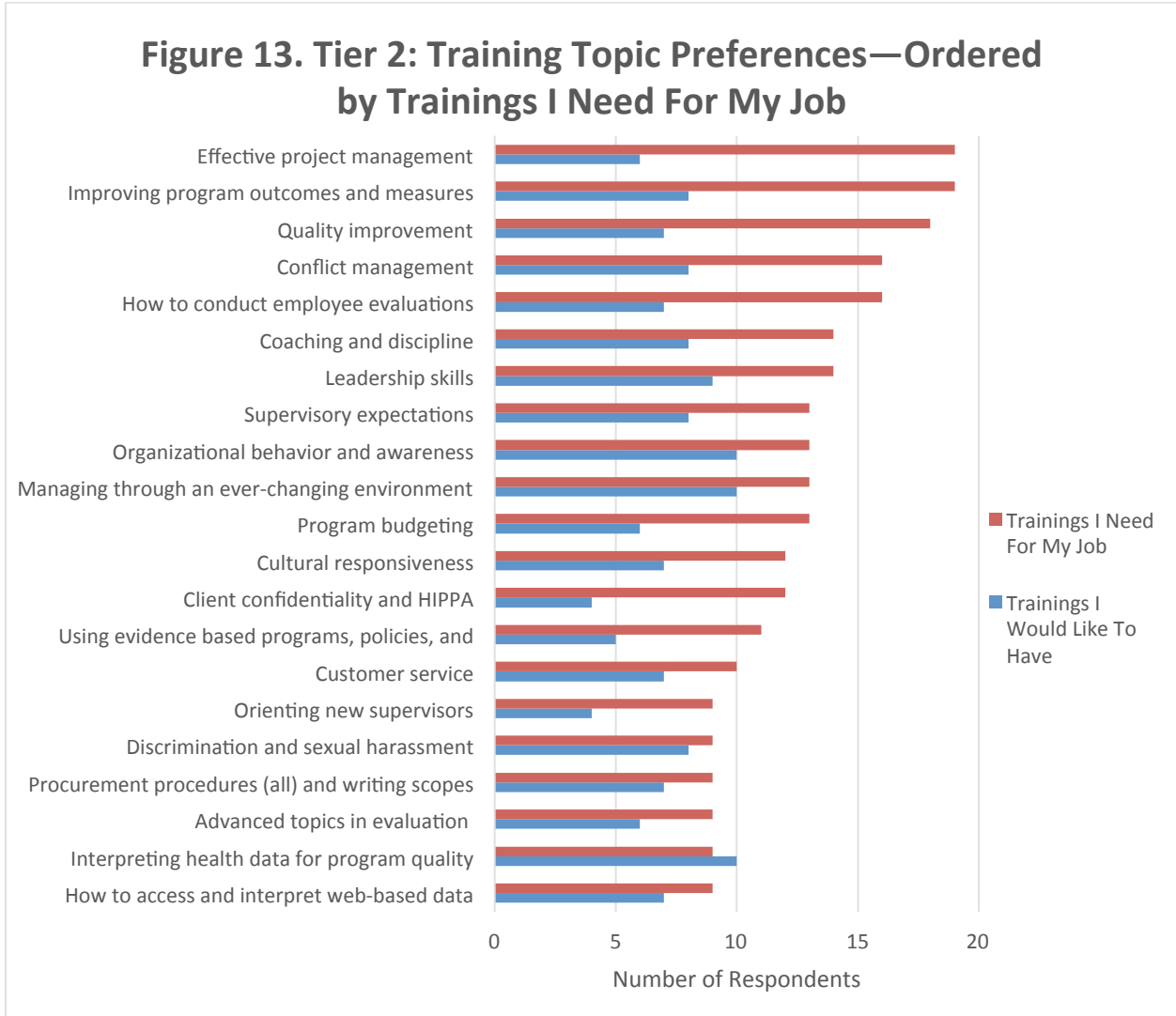
Note. “For my job”, 21 Tier 1 respondents said that they would like to have trainings on the topics of Planning public health programs, How to access and interpret web-based data, Train the trainer program development, and How to avoid favoritism.

For Tier 1, training topics, ordered by the frequency with which the respondents said they “would like to have” them, are shown in Figure 12. The two trainings selected the most were Leadership skills and Public health 101. Counts of Tier 1 respondents who said the trainings in Figure 12 would be needed for their job are also shown (see red bars).

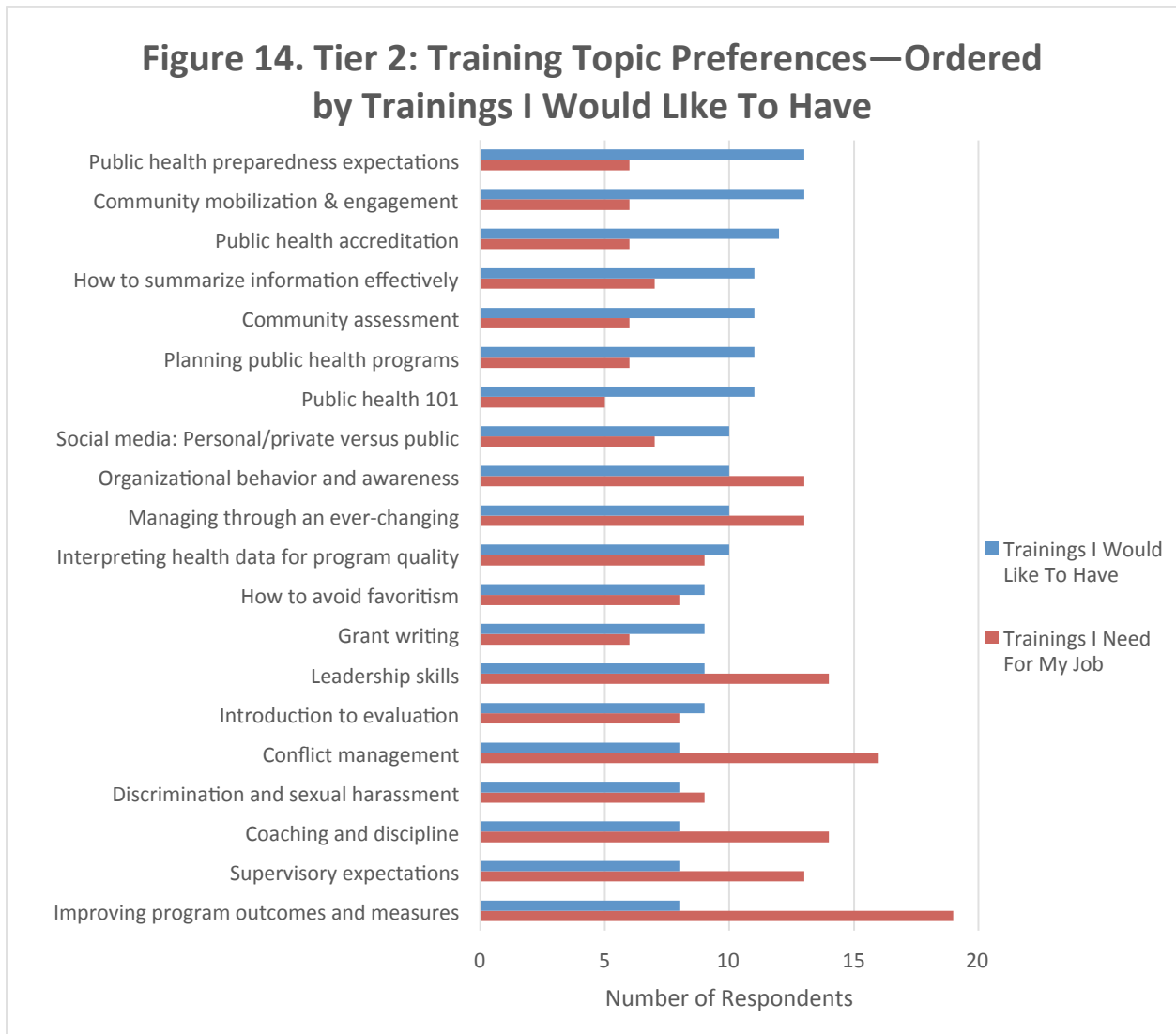


Note. Thirty-two Tier 1 respondents reported that they would like to have trainings on the topics of Financial decision making, Advocacy versus lobbying, Public health preparedness expectations, and Customer service.

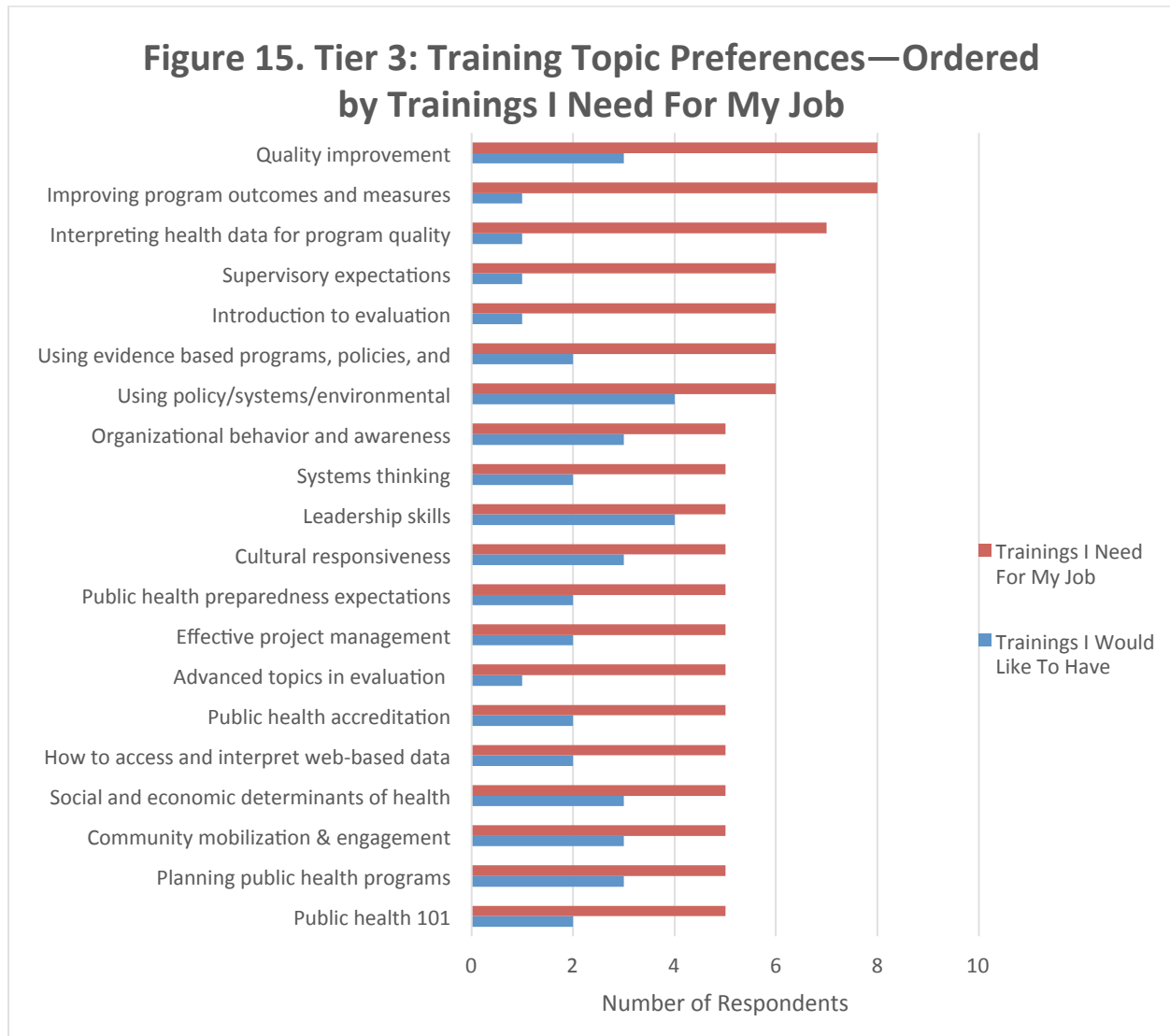
General trainings ordered by how frequently they were selected by Tier 2 as being needed for the job are shown in Figure 13. The two trainings selected the most were Effective project management and Improving program outcomes and measures. Counts of Tier 2 respondents who said they “would like to have” the trainings in Figure 13 are shown in blue.



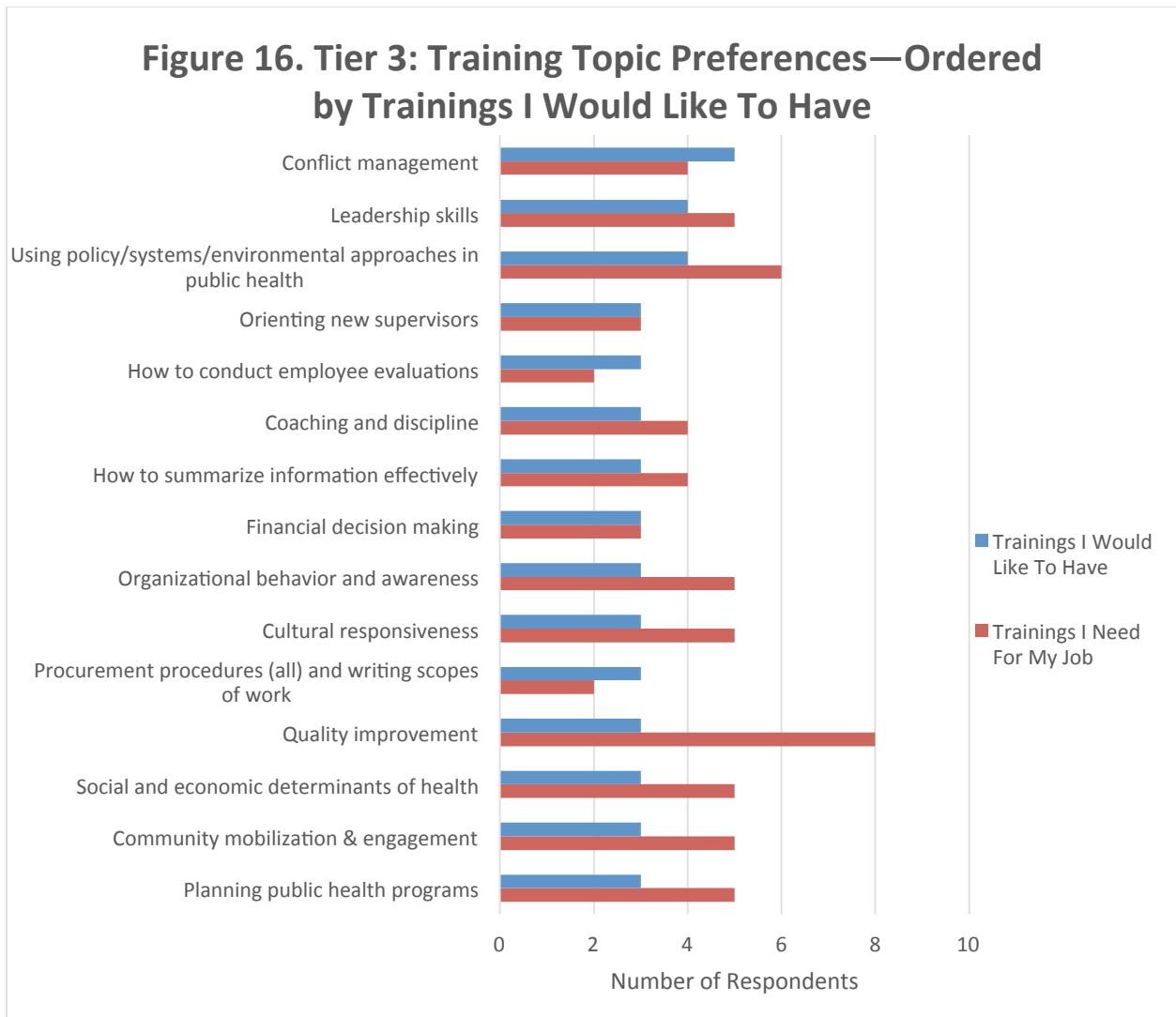
For Tier 2, training topics, ordered by the frequency with which the respondents said they “would like to have” them, are shown in Figure 14. The two trainings selected the most were Public health preparedness expectations and Community mobilization & engagement. Counts of Tier 2 respondents who said the trainings in Figure 14 were needed “for my job” are also shown (see red bars).



General trainings ordered by how frequently they were selected by Tier 2 as being needed for the job are shown in Figure 15. The two training topics selected the most were Quality improvement and Improving program outcomes and measures. Counts of Tier 3 respondents who said they “would like to have” the trainings in Figure 15 are shown in blue.



For Tier 3, training topics, ordered by the frequency with which the respondents said they “would like to have” them, are shown in Figure 16. The two trainings selected the most were Conflict management and Leadership skills. Counts of Tier 3 respondents who said the trainings in Figure 16 were needed “for my job” are also shown (see red bars).



Note. Two Tier 3 respondents also said that they would like to have trainings in Public health 101; Community assessment; How to access and interpret web-based data; Using evidence based programs, policies, and practices; Public health accreditation; Program budgeting; Effective project management; Public health preparedness expectations; Systems thinking; Grant writing; How to avoid favoritism; Social media: Personal/private versus public.

Tiers 2 and 3 staff were also asked to identify the trainings that they would like for their staff (Figure 17). Conflict management and Customer service were the two top selections. Note that Customer service was the 2nd most selected (needed for my job) training topic among Tier A staff and the 4th among Tier 1 staff (see Figures 9 and 11). Conflict management was 13th most selected among Tier A staff and the 7th training topic most often selected by Tier 1 staff.



Computer Program/Software Training Topics

Staff from each tier were asked to indicate the types of computer training topics that would be important to their jobs, and the types of computer training topics that would be of personal interest. By far, for Tiers A, 1 and 2, the topic selected most often as “important to my job” was Microsoft Office (Figures 18-20). Microsoft Office was also the topic selected most often by Tier A and Tier 1 as being “of personal interest.” For Tier 3, Microsoft Office and Share Point tied for the topic most often selected as “important to my job” (Figure 21).

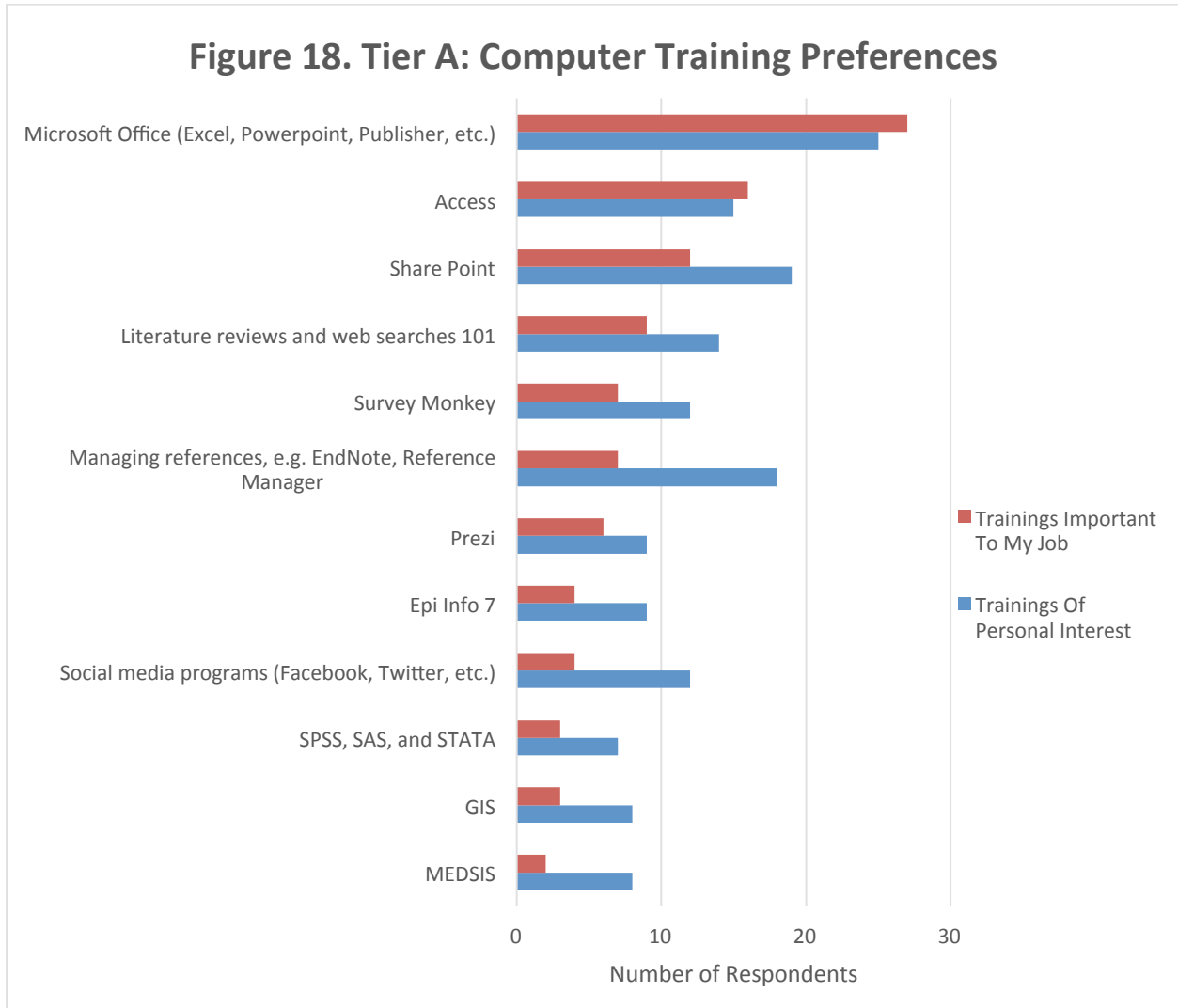


Figure 19. Tier 1: Computer Training Preferences

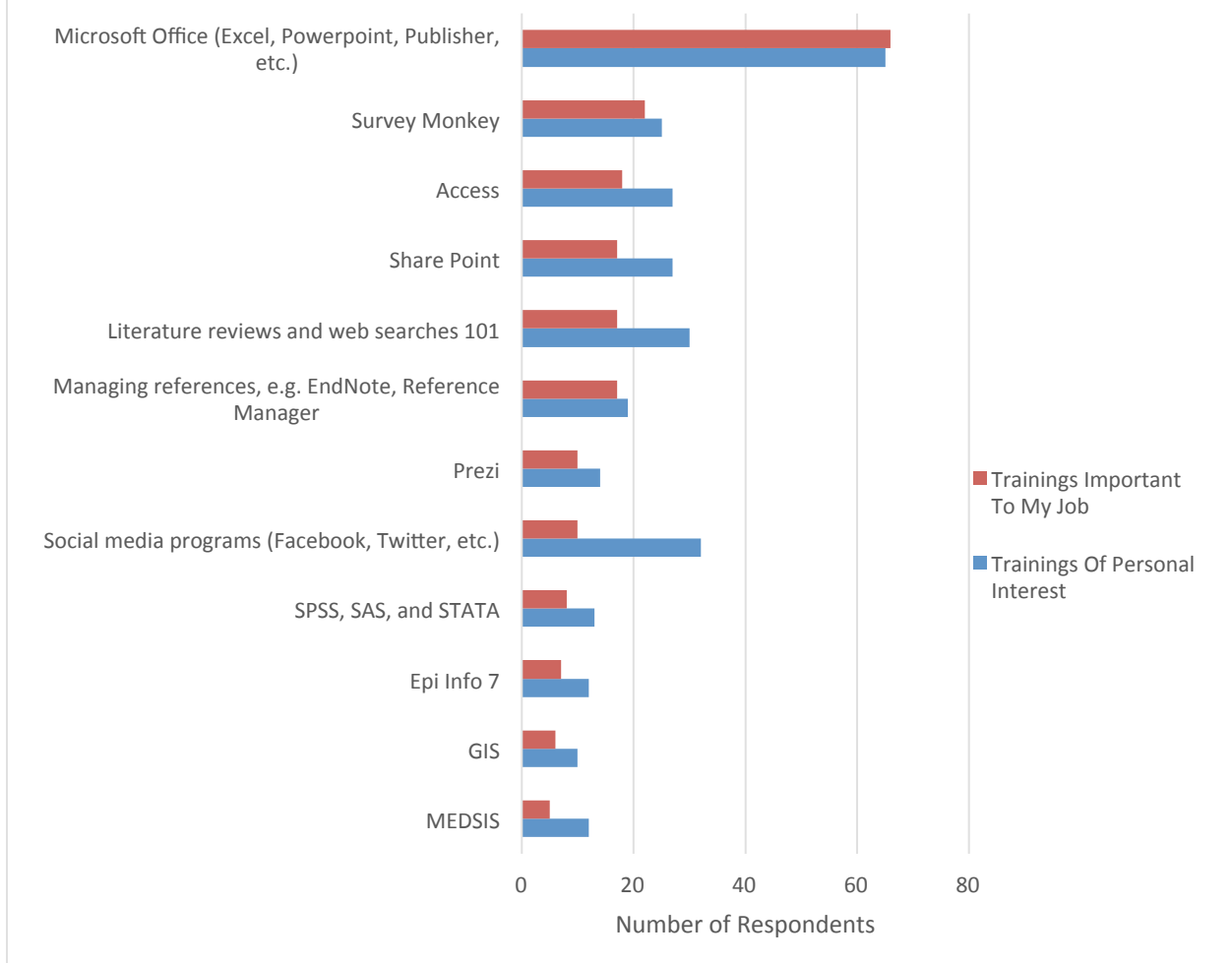


Figure 20. Tier 2: Computer Training Preferences

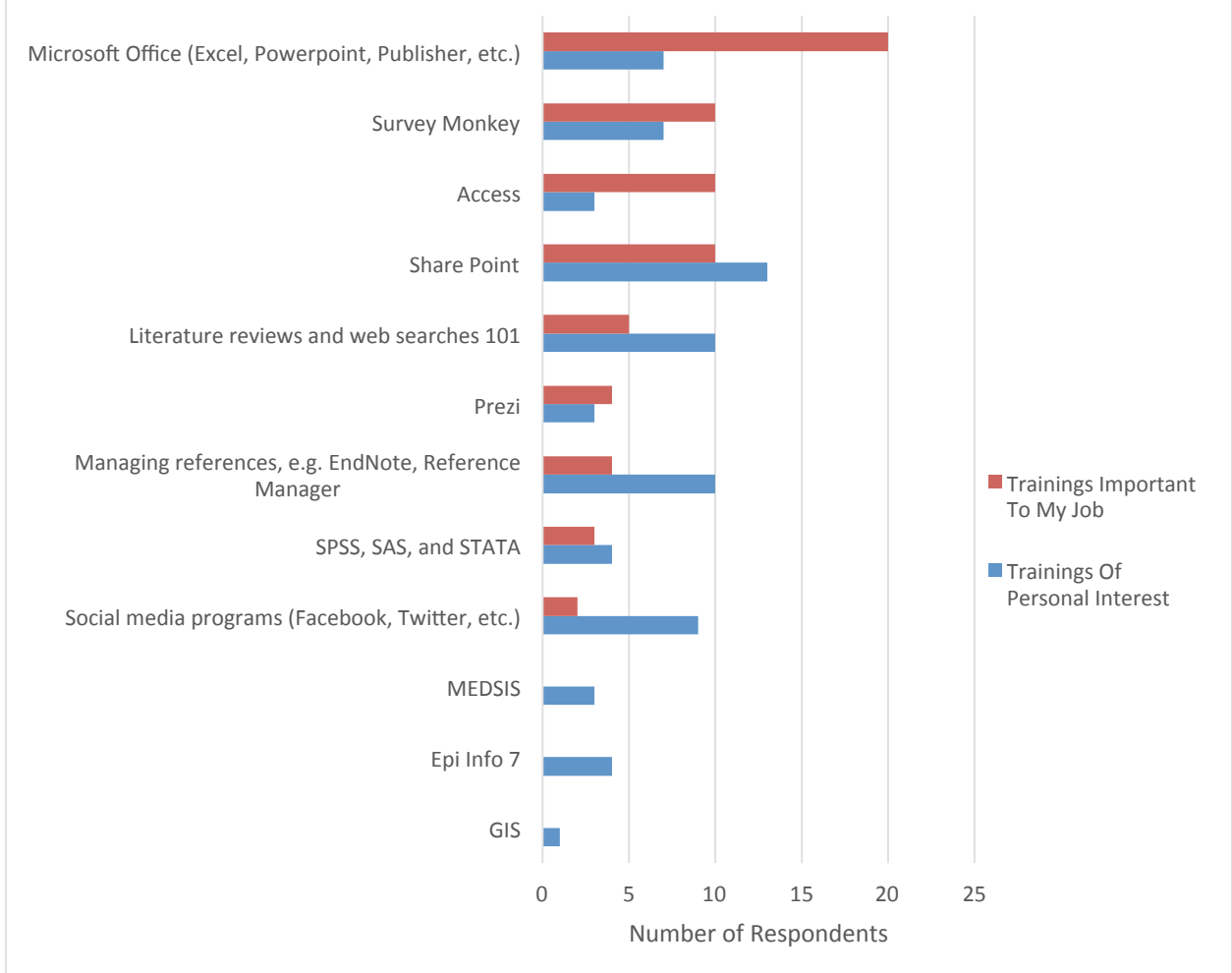
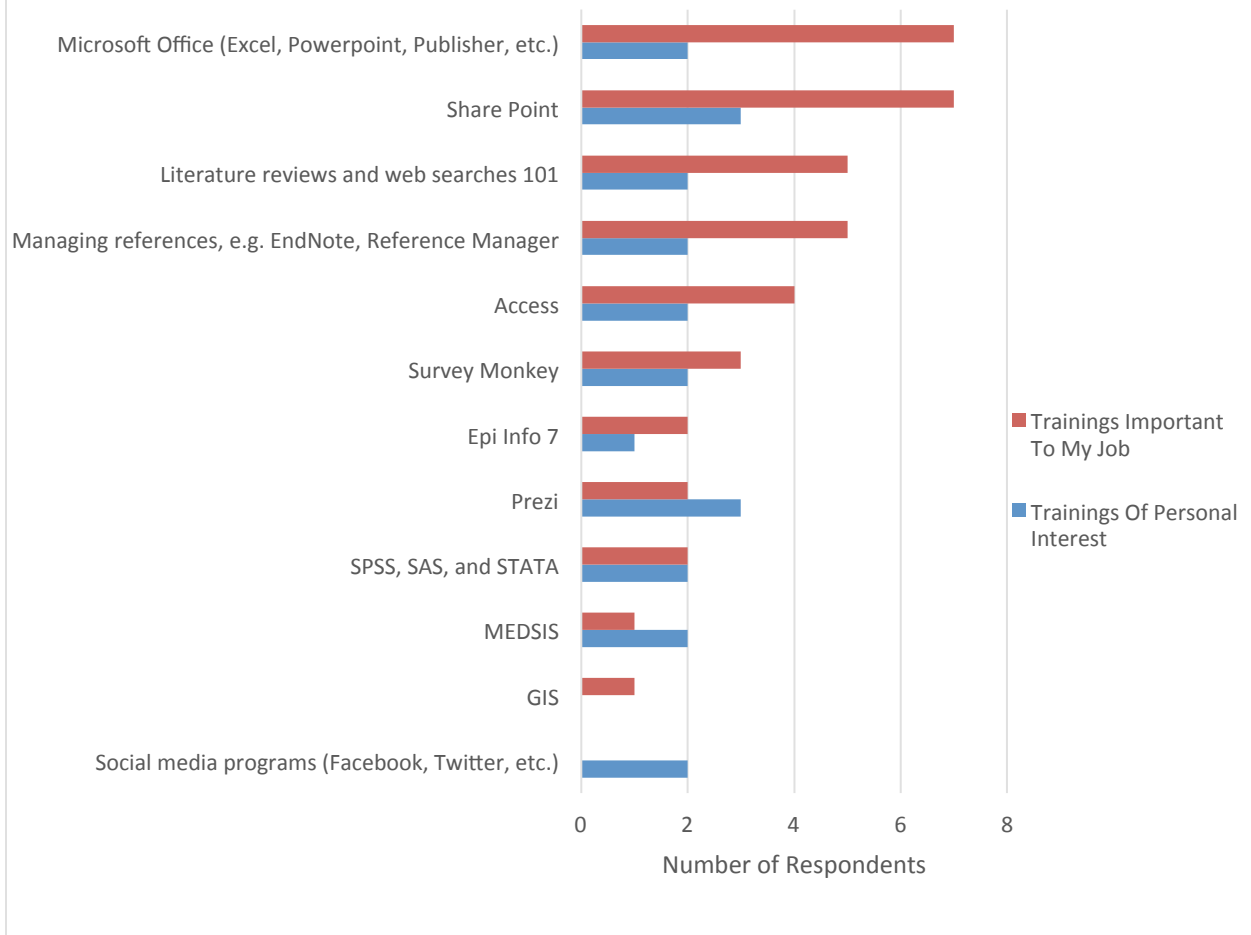
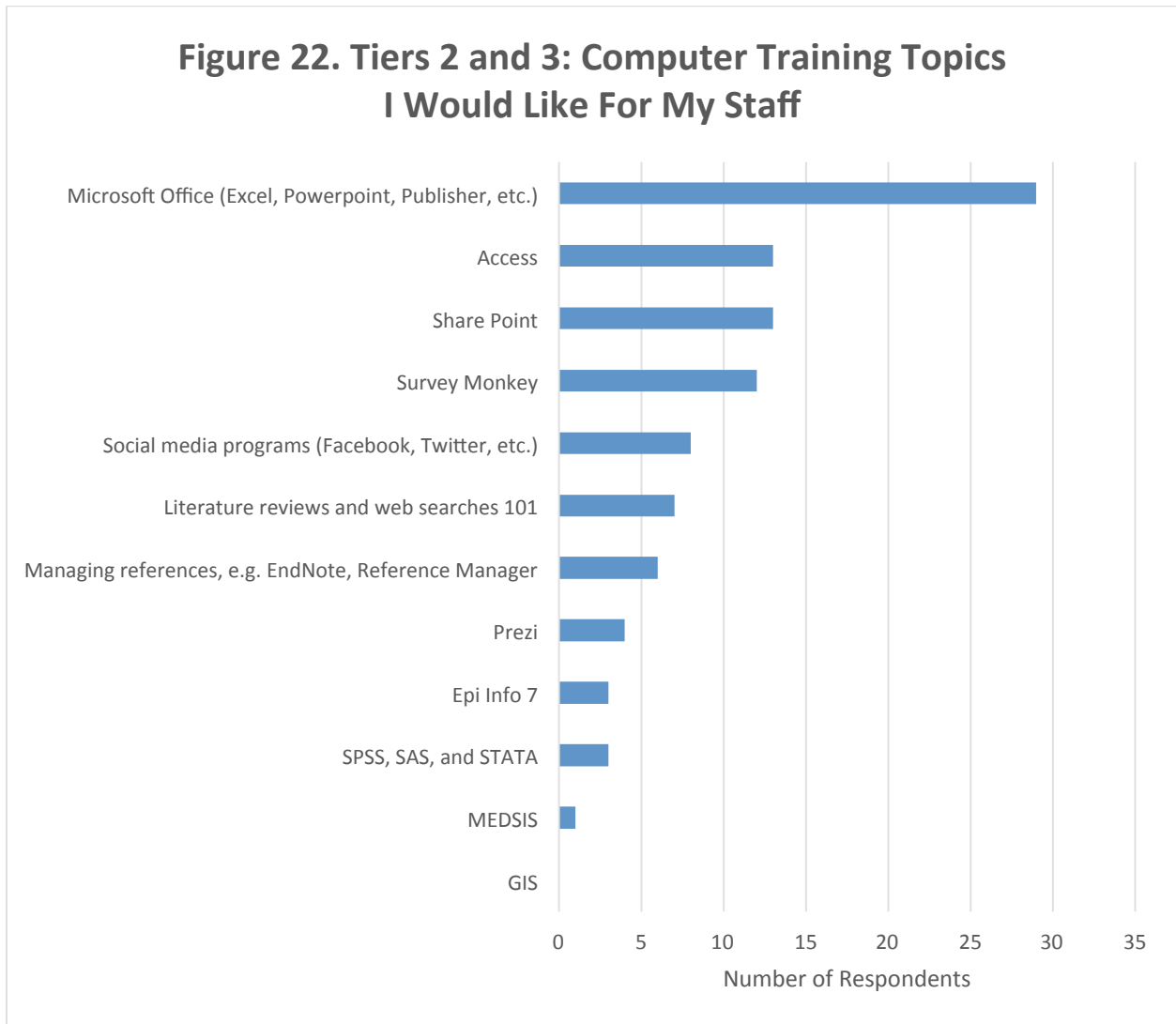


Figure 21. Tier 3: Computer Training Preferences

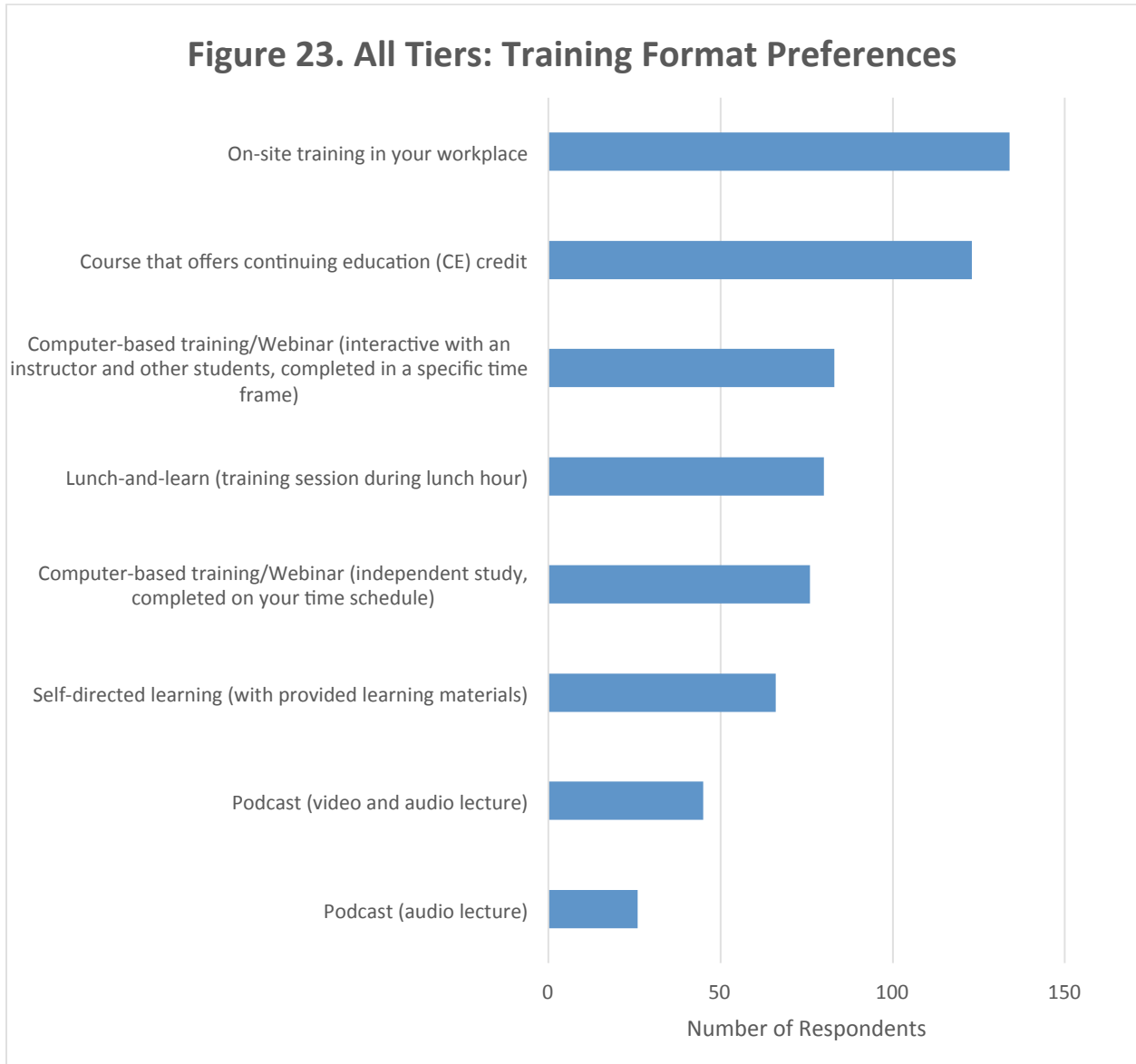


Tiers 2 and 3 were also asked to indicate the types of computer topic trainings they would like for their staff (Figure 22). Again Microsoft Office was the most commonly selected training. Access and Share Point were the second most common selections.



Training Format Preferences

All staff were asked to indicate their preferred formats for training. The top preferred format for training was On-site training in your workplace. Preferences were also expressed for trainings that offered Continuing Education Credit, and for Computer-based training/Webinar that included interactions with instructors and other students.



Next Steps

The public health core competency findings presented here can be used by the XXX XX Health Department leadership team to help design and develop individual and department training work plans. Employees were asked to print out the calculated scores given to them at the end of the core competency section of the survey, as these scores can help support development of a work plan to improve and reinforce an employee's self-assessed skills.

The Training Topics section of the survey provides information that can be used to plan trainings that employees have indicated are important. The WRPHTC can assist in the process of recommending both in-person and online trainings to the XXX XX Health Department that are responsive to the survey findings. The online trainings recommended will be offered through the AZTRAIN learning management system supported by the WRPHTC.

Appendix A: Survey Introductory Page/Survey