

**ROADMAP:**

**STRENGTHENING  
THE PUBLIC HEALTH  
WORKFORCE IN  
NEW YORK STATE**

**New York State Public Health Workforce Task Force  
in collaboration with the New York State Department of Health  
and the New York-New Jersey Public Health Training Center**

**May 2006**

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# ROADMAP: STRENGTHENING THE PUBLIC HEALTH WORKFORCE IN NEW YORK STATE

## INTRODUCTION/EXECUTIVE SUMMARY

The New York State Public Health Council convened a work group in February 2002 to assess New York's public health infrastructure and to recommend steps needed to improve its public health workforce, organizational systems and relationships, and data and information systems. The work group found that the state was facing significant workforce challenges and that improvement in workforce training was of utmost importance. It recommended that the New York State Department of Health:

*...convene a statewide public health training task force including the schools of public health in New York State, representatives from the State and local health departments and other academic partners. This task force will consider issues of access, competency-based training, leadership subjects and public health career curricula at schools and colleges.<sup>1</sup>*

The New York State Department of Health, in conjunction with the New York-New Jersey Public Health Training Center<sup>2</sup>, convened the Public Health Workforce Task Force in July 2005 to address the public health workforce challenges in New York State (NYS). Attention to public health workforce development is essential to ensure that there are a sufficient number of trained professionals entering the work force and that continuing education for these professionals is accessible, encouraged, relevant and linked to core public health competencies. National and state reports indicate however that the workforce is inadequate, and that if current workforce demographic trends continue, state and local public health agencies will be unable to carry out their mission.<sup>3</sup> Both the educational pipeline into public health and the system to meet the on-going education and training needs of the public health workforce have been viewed as inadequate and require additional attention.

This "Roadmap" for strengthening the state's public health workforce uses national reports, work done in the State and recommendations from the Task Force at two meetings and subsequent conference calls held in the summer and fall of 2005 to propose priority actions for how NYS can address public health workforce development. The Roadmap describes the public health workforce, both nationally and in NYS, provides a vision for an adequately sized and competent workforce in NYS, and describes priority strategies and activities that can and have been initiated to help achieve goals in four priority workforce areas: *leadership, recruitment, education and training, and retention*. This report has been formally endorsed by the New York State Public Health Council at their March 10, 2006 meeting, as well as by a number of key stakeholder organizations.<sup>4</sup> They have agreed to use the roadmap for implementing recommended actions to strengthen the public health workforce. Professional, academic and governmental public health organizations will serve on project charter

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<sup>1</sup> New York State Public Health Council, *Strengthening New York's Public Health System for the 21<sup>st</sup> Century*, 2003, p. 4.

<sup>2</sup> The NYNJ PHTC is one of 14 Public Health Training Centers across the nation, funded by the Health Resources and Services Administration (HRSA) to bring the theoretical expertise of faculty at accredited schools of public health together with the practical experience of leaders in public health practice. Members include the Columbia University Mailman School of Public Health, the University at Albany School of Public Health, and the University of Medicine and Dentistry of New Jersey School of Public Health.

<sup>3</sup> ASTHO, 2004.

<sup>4</sup> Organizations include the NY Medical College, State University at Albany School of Public Health, the NY-NJ Public Health Training Center and the School of Public Health at the State University at Buffalo, the Healthcare Association of New York State, the Schuyler Center for Analysis and Advocacy, and local health departments in Livingston, Rockland and Sullivan counties along with the New York State Association of County Health Officials.

teams to design and implement action plans to achieve the recommended objectives and strategies. The teams will report back on their accomplishments annually.

## **BACKGROUND: THE IMPORTANCE OF THE PUBLIC HEALTH WORKFORCE**

The status of the public health workforce has received a lot of attention recently.<sup>5</sup> The Centers for Disease Control and Prevention (CDC) describes public health as a complex network of systems, people, and organizations. It defines public health actions as those that “prevent epidemics and the spread of disease, protect against environmental hazards, prevent injuries, encourage healthy behavior, help communities to recover from disaster, and ensure the quality and accessibility of health services.”<sup>6</sup> National organizations have used the Ten Essential Public Health Services to describe core activities of public health.<sup>7</sup> In recent years, the public health workforce has been asked to take on emerging and complex health issues such as:

- Bioterrorism preparedness;
- Naturally occurring epidemics like West Nile Virus and SARS;
- Public health planning for pandemic influenza, including managing limited vaccine supplies;
- Health problems such as tuberculosis in immigrant populations;
- Eliminating health disparities;
- The surge in chronic diseases related to the impact of an aging population and increases in obesity;
- Opportunities for health promotion and disease prevention in the areas of tobacco control and cancer screening and prevention.

The range of activities and services public health workers provide requires that the workforce be experienced, motivated, and well trained. Attention to public health workforce development is essential to ensure that there are a sufficient number of trained professionals entering the work force and that continuing education for these professionals is accessible, encouraged, relevant and linked to core public health competencies.<sup>8</sup> The central issue is how to strengthen the public health workforce so that its constituency is served by a “fully trained, culturally competent health team, representing the optimal mix of professional disciplines”.<sup>9</sup> This becomes even more important as national public health leaders discuss credentialing standards for public health professionals.<sup>10</sup>

### **Challenges Facing the Public Health Workforce in New York State**

The public health work force is defined as “...those individuals responsible for providing essential public health services regardless of the organization in which they work and who are competent to perform public health functions and assure the delivery of essential public health services.”<sup>11</sup> A public health professional is defined as: “... a person educated in public health or a related discipline who is employed to improve health through a population focus.”<sup>12</sup> Because public health departments are seen as the primary organizing and mobilizing force for public health practice in most communities<sup>13</sup>, this road map concentrates on the issues facing the local and state governmental public health workforce in NYS. They work in the NYS Department of Health and 58 local health departments (LHDs).

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<sup>5</sup> Institute of Medicine, National Academy of Sciences. *Who Will Keep the Public Healthy*, Washington D.C.: National Academy Press, 2003; Institute of Medicine, National Academy of Sciences. *The Future of the Public's Health in the 21<sup>st</sup> Century*, Washington D.C.: National Academy Press, 2002.

<sup>6</sup> Centers for Disease Control and Prevention. *Public Health's Infrastructure, A Status Report*. 2003. p. 4.

<sup>7</sup> Public Health in America, Public Health Functions Steering Committee, US Department of Health and Human Services, 1994

<sup>8</sup> NYS PHC, p. 3.

<sup>9</sup> CDC, 2003. p. iv.

<sup>10</sup> IOM, 2002, p. 6.

<sup>11</sup> NYS PHC, p. 40.

<sup>12</sup> IOM, 2002.

<sup>13</sup> American Public Health Association. (2000). *Local Public Health Practice: Trends and Models*. Washington DC

## Educational Preparation of the Public Health Workforce

Specific data on the educational training of the public health workforce in NYS is not available, but surveys with local health departments participating in the NYS Public Health Council Public Health Infrastructure Work Group study indicated that the majority of staff is not formally trained in public health. These findings mirror national data. An estimated 80% of the current workforce nationally lacks formal training in public health.<sup>14</sup>

## Size and Composition of Workforce

Of 11 million workers employed in the health sector in the U.S., a national enumeration of the public health workforce in 2000 conducted by the United States Health Resources and Services Administration (HRSA) estimated that over 448,000 of these workers were public health workers, by the broadest definition, i.e. individuals who provide one or more of the essential public health services, regardless of discipline or work setting. Using the same definition, the HRSA study found that New York State had approximately 18,700 public health workers or 73 workers per 100,000 population, compared to 158 per 100,000 for the entire country. New York was found to be in the lower third of states in public health workers per capita.<sup>15</sup>

In 2002, it was estimated that more than 12,700 full time equivalent (FTE) public health workers were employed by the state and local health departments in New York State, including New York City.<sup>16</sup> Of the total, nearly 57% worked in the 58 local health departments across the state while the remainder worked for the New York State Department of Health. A survey of local health departments, including New York City, conducted in 2001-02 provided data on the size and composition of their workforce (see below and Figures 1-3).<sup>17</sup>

- While nurses represented 22% of the total LHD workforce, they accounted for 42% of FTEs in rural LHDs, but only 14% of FTEs in urban LHDs.
- Scientific/investigative staff comprised 20% of the total LHD work force. This included environmental health staff (i.e., engineers, sanitarians, and environmental technicians) who alone represented 15% of the total local public health workforce. Twenty-one counties have no environmental health staff because environmental health services are provided by NYS Department of Health staff.
- Epidemiologists, communicable disease staff and disease control investigators represented 5% of the total LHD work force.
- Education/outreach staff comprised 10% of the total LHD workforce, while health educators who were included in this category were only 2% of the total LHD work force.
- Physicians comprised 1% of the total LHD work force.
- Support personnel, including program aides, public health assistants and support staff, comprised nearly 28% of the total LHD workforce.

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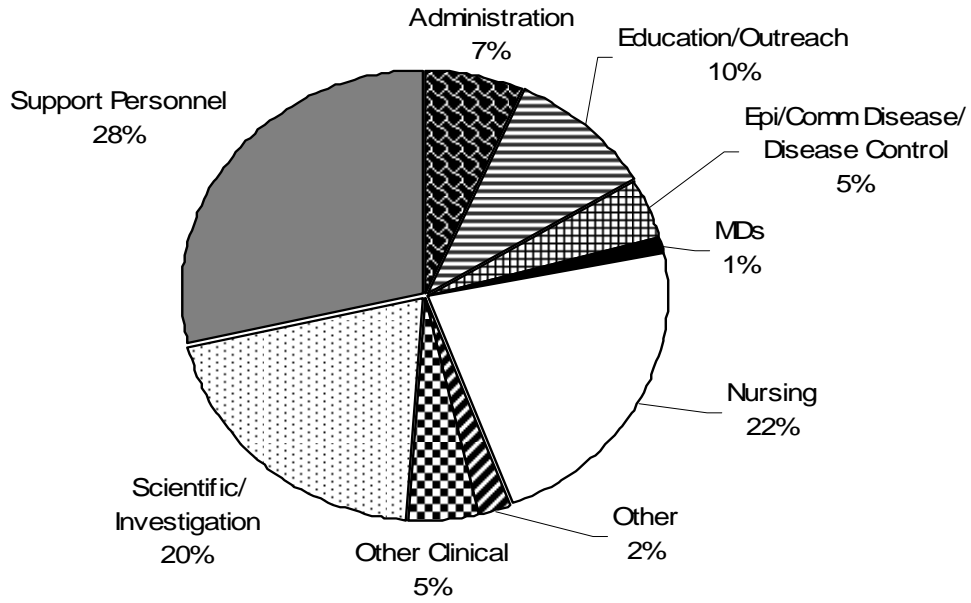
<sup>14</sup> IOM, 2002, p. 116.

<sup>15</sup> U. S. Department of Health and Human Services Health Resources and Services Administration. (2001) The Public Health Work Force: Enumeration 2000. Washington DC

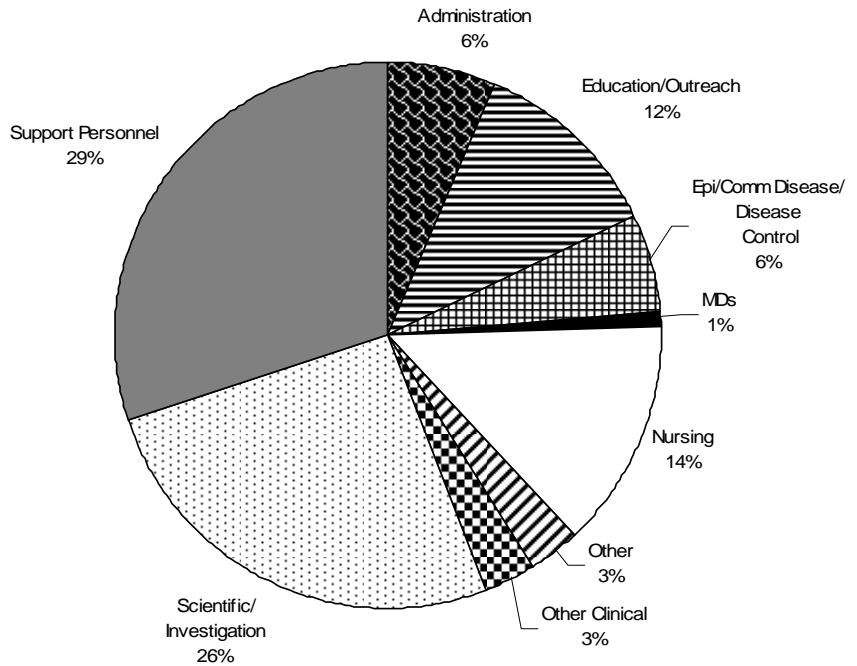
<sup>16</sup> NYS PHC, p. 43

<sup>17</sup> Surveys were received from 54 of 58 LHDs, for a response rate of over 93%. Staff working exclusively for Early Intervention Programs or in Certified Home Health Agencies were not included in the enumeration. Data may under-represent NYC DOHMH staff.

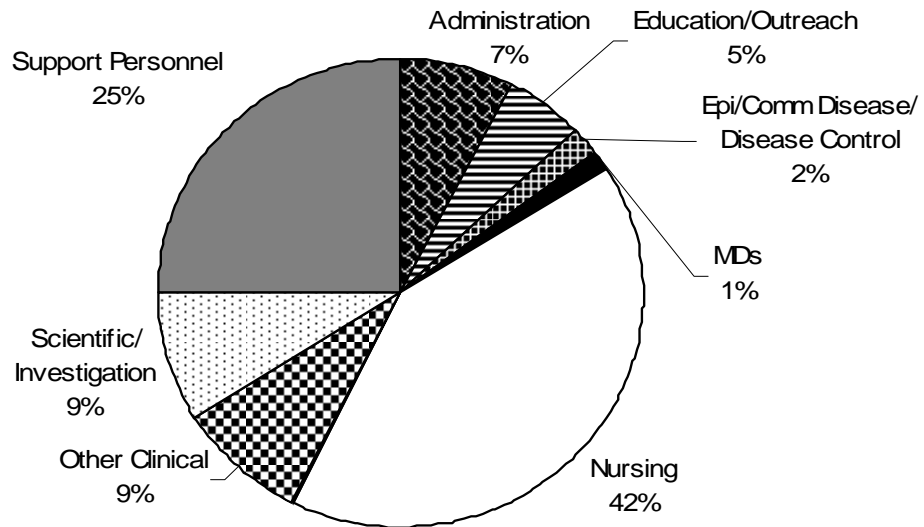
**Figure 1**  
**Total LHD FTEs in New York State, 2002**  
**By Job/Occupational Category**



**Figure 2**  
**Total Urban Local Public Health Agency FTEs in New York State, 2002**  
**By Job/Occupational Category**



**Figure 3**  
**Total Rural Local Public Health**  
**Agency FTEs in New York State, 2002**  
**By Job/Occupational Category**



### Diversity of the Public Health Workforce

CDC has recommended that by 2010, all public health practitioners should be competent in the culture(s) and language(s) of the people they serve.<sup>18</sup> The Institute of Medicine reported on the severe under-representation of racial and ethnic minorities in the health professionals in general, including physicians and nurses, and on the importance of training to improve cultural competence for all health professionals, including public health professionals.<sup>19</sup> The Sullivan Commission on Diversity in the Health Care Workforce recommends increasing the number of minority health professionals as a key strategy to eliminating health disparities, a major public health challenge.<sup>20</sup> There are no data on how closely the state and local public health professionals reflect the racial and ethnic makeup of the populations they serve, or their capacity to deliver public health services in a culturally competent way.

<sup>18</sup> CDC, 2003, p. 16.

<sup>19</sup> IOM, 2002.

<sup>20</sup> Sullivan Commission on Diversity in the Healthcare Workforce. *Missing Persons: Minorities in the Health Professions*, September 2004, The Sullivan Commission.

## **Aging of the Public Health Workforce**

A recent survey by ASTHO and the Council of State Governments found that the public health workforce in the U.S. is rapidly aging; the average age is 46.6 years. In many states, including NYS, as many as 45% of the public health workforce may be eligible to retire in the next five years.<sup>21</sup>

## **Shortages of Public Health Professionals**

The ASTHO survey also pointed to chronic shortages of public health professionals in a majority of states in the next 5-10 years. Shortages are and will be particularly acute for nurses and epidemiologists.<sup>22</sup> The national survey data indicate that there is also a chronic shortage of environmental health practitioners and that accredited undergraduate environmental health programs graduate only about 300 students each year, too few to meet the current need.<sup>23</sup> A growing shortage of qualified workers exacerbated by the deepest state level budget cuts across the country in 60 years will have a profound impact on the ability to fill vacancies.<sup>24</sup>

Results of a survey conducted by The New York State Personnel Council for the State Department of Civil Service in 2003 show that NYS mirrors these national trends. The survey found the average age of a New York State worker to be 46.4 years with 15.9 years of service; 17% of those were 55 years of age or older; current vacancy rates are up to 20% in some agencies and the employment turnover rates are 14%.<sup>25</sup>

## **Need to Strengthen the Public Health Workforce in NYS**

Although the public health workforce is viewed as a vital component of the public health infrastructure in the U.S., the inadequacy of the public health workforce to provide basic public health services has been a major concern since it was first highlighted in the 1988 Institute of Medicine report on the future of public health.<sup>26</sup> If current workforce demographic trends continue, state and local public health agencies will be unable to carry out their mission.<sup>27</sup> Both the educational pipeline into public health and the system to meet the on-going education and training needs of the public health workforce have been viewed as inadequate and require additional attention.<sup>28 29</sup> This Roadmap proposes a vision, mission, goals, and strategies for how New York State can strengthen its public health workforce.

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<sup>21</sup> Association of State and Territorial Health Officials (ASTHO) and the Council of State Governments. (April 2004). *Health Employee Worker Shortage Report, A Civil Service Recruitment and Retention Crisis*.

<sup>22</sup> ASTHO, p. 2.

<sup>23</sup> ASTHO. Issue Brief: *Public Health Workforce Shortage: Environmental Health Practitioners*, March 2005.

<sup>24</sup> ASTHO, 2004, p. 3.

<sup>25</sup> NYS Personnel Council. *Update on Civil Service's Strategic Directions, 2004 Initiatives*, p. iv.

<sup>26</sup> Institute of Medicine, National Academy of Sciences. *The Future of Public Health*. Washington, D.C. National Academy Press, 1988

<sup>27</sup> ASTHO, 2004.

<sup>28</sup> Salinsky, E. (2002). Will the Nation Be Ready for the Next Bioterrorism Attack? Mending Gaps in the Public Health Infrastructure. *National Health Policy Forum Issue Brief, George Washington University*, # 776, 1-19.

<sup>29</sup> IOM, 2002, p. 116-17; IOM, 2003, pp. 1-26.



**ROADMAP:  
STRENGTHENING THE PUBLIC HEALTH WORKFORCE IN NEW YORK STATE**

**VISION, MISSION, GOALS and GUIDING PRINCIPLES**

**VISION**

A diverse and skilled governmental public health workforce of sufficient size to protect and improve the health of New Yorkers.

**MISSION**

To develop and implement a plan of action that will create the systems needed to strengthen and continually improve New York's state and local public health workforce through leadership, recruitment, training and education, and retention.

**GOALS**

1. Leadership: Assure that specific systems are in place to identify, mentor, train and test public health leaders.
2. Recruitment: Increase the number, caliber and diversity of workers qualified to enter the state and local public health workforce in needed roles.
3. Training and Education: Sustain the skills and competencies of public health workers to enable them to perform in an evolving public health environment.
4. Retention: Retain competent and diverse public health workers in governmental public health careers.

**GUIDING PRINCIPLES**

The work and recommendations of the task force are based on the following guiding principles:

- Investing in strengthening the public health workforce is a key way to improve the health of communities.
- The public health needs of New York's diverse communities establish the basis for defining the needed size, composition and skills of the governmental workforce.
- The task force recognizes that the public health system involves multiple partners, including communities, the health care delivery system, employers and business, the media and academia. While the focus of this report is the governmental public health workforce, increasing the number of individuals choosing a public health career is not limited to the number of individuals in governmental public health agencies. Rather, success is determined by measuring how many choose to stay with any of the partners in the public health system.
- Lifelong learning for the public health workforce is essential for workers at all levels to respond to the continually evolving public health environment.

- The development of the public health workforce will be guided by nationally recognized frameworks including the Core Public Health Competencies developed by the Council on Linkages between Academia and Public Health Practice.<sup>30</sup>
- The four goal areas and the objectives and strategies to achieve them are inter-related and of equal importance. In many cases, achieving objectives in one area, such as training and education, will help achieve other goal areas such as retention.
- The objectives and strategies are intended to reach three audiences: students choosing professional degrees and careers in public health; those workers already in the public health workforce needing additional training for their current positions, those workers already in the workforce moving up the career ladder within public health agencies or changing careers to start a position in a public health agency.
- Performance measures will be used to measure the effectiveness of implementation of the task force's recommendations. The task force will strive to use outcome measures. Obtaining current data on the workforce is essential to be able to develop outcome measures.

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<sup>30</sup> The Council on Linkages between Academia and Public Health Practice. *Core Competencies for Public Health Professionals*. Washington, D.C., Public Health Foundation, 2001.

## **Vision:**

**A diverse and skilled governmental public health workforce of sufficient size to protect and improve the health of New Yorkers.**

## **Mission:**

**To develop and implement a plan of action that will create the systems needed to strengthen and continually improve New York's state and local public health workforce through leadership, recruitment, training and education, and retention.**

## **GOALS**

### **Leadership:**

Assure that specific systems are in place to identify, mentor, train and test public health leaders.

### **Recruitment:**

Increase the quantity, caliber and diversity of workers qualified to enter the state and local public health workforce in needed roles.

### **Training & Education:**

Sustain the skills and competencies of public health workers to enable them to perform in an evolving public health environment.

### **Retention:**

Retain competent and diverse public health workers in governmental public health careers.

**Building a Foundation**

**Building a Foundation**

## **Partners in Action**

Academia

Local Health  
Departments

State Health  
Departments

Health & Community  
Based Organizations

## OBJECTIVES and STRATEGIES

### Building the Foundation

To effectively measure the success of proposed strategies, it is necessary to increase the knowledge about the size and composition of the public health workforce. The following objectives and strategies are proposed to establish a way to measure the achievement of the Leadership, Recruitment, Training and Education, and Retention goal areas.

Objective	Strategies	Measure	Success Outcome	Time-line	Responsible Party	Current Participants
A. Collect initial and ongoing data regarding the size & composition of the public health workforce	1. Conduct functional enumeration study to determine current workforce composition, measure extent of workforce needs, project future staffing needs and identify unmet training needs					Center for Health Workforce Studies, UA SPH NYSACHO NYS DOH
	2. Develop and add a set of questions on workforce issues to the LHDs annual reports to ensure regular data collection.					

**GOAL: Leadership**

Assure that specific systems are in place to identify, mentor, train and test public health leaders.

Objective	Strategies	Launch Year	Responsible Organizations	Resource Requirements
<p>A. Increase the number of appropriately prepared and tested leaders in S/LHDs</p>	<p>1. Identify and promote competencies for Public Health leaders:</p> <ul style="list-style-type: none"> <li>a. Build competencies into civil service testing program</li> <li>b. Build competencies into performance evaluation system</li> </ul>	2006	<p>Academics, S/LHDs, PH Leadership Institutes, Professional Organizations, NYSACHO and NYSAC</p>	Low Needs
	<p>2. Develop and implement mechanisms to provide continued leadership development based on the identified competencies for staff working at all levels of state and local health departments at all levels of the agency, with special focus on those who are in career paths to become leaders or who are already leaders. The following activities should be implemented to help achieve this strategy:</p> <ul style="list-style-type: none"> <li>a. Establish a recommended set of competency based training topics/courses for new public health leaders, including courses in strategic systems planning, management, supervision, policy development and implementation skills, communication and media/marketing, and political advocacy</li> <li>b. Partner with a broad set of education providers (e.g. MPH Schools, MPA schools, community colleges, EAP) to deliver appropriate continuing education and training</li> <li>c. Offer leadership training by providing scholarships and mentoring for students in the Northeast Regional and National Public Health Leadership Institutes</li> <li>d. Support PH Leadership Institutes to offer dynamic ongoing practice opportunities to support leaders once offsite PH Leadership Institute training sessions are completed</li> <li>e. Provide orientation for and a mentoring program for new Public Health Directors/Commissioners and their Deputies</li> <li>f. Establish, broaden, and support leadership mentoring programs for staff at all levels within health departments.</li> <li>g. Develop mentoring and consulting programs between health departments and alumni associations of schools/programs of public health to share expertise and problem solve</li> <li>h. Grow leaders within a department of health by identifying work activities and experience needed by leaders and rotate staff through these activities</li> </ul>	2006	<p>Academics, S/LHDs, PH Leadership Institutes, Professional Organizations, Unions, NYSACHO</p>	High Needs

**GOAL: Leadership** *(continued from previous page)*

Objective	Strategies	Launch Year	Responsible Organizations	Resource Requirements
	3. Assess and test leadership skills within a continuous quality improvement process: <ul style="list-style-type: none"> <li>a. Develop a leadership self-assessment process.</li> <li>b. Use table top and inbox exercises to test leaders in applying the skills needed as a public health leader in crisis and more routinely encountered situations.</li> <li>c. Evaluate and improve leadership training to ensure outcomes are met</li> </ul>	2007	Academics, S/LHDs	High Needs
B. Assure leadership drives workforce efforts	1. Identify and provide examples/best practices of ways that state and local health departments have supported workforce development	2006	Academics, S/LHDs	Medium Needs
	2. Identify and address workforce needs (conduct local enumeration)	2006	Academics, S/LHDs	High Needs
C. Assist leaders in identifying environmental, political and other factors that impact ability to lead	1. Create a resource and focal point for leadership development in NYS to complement and improve leadership competencies of staff in state and local health departments, the Preparedness Center, the Public Health Training Center and other work site venues	2007	PHLI, S/LHDs	Medium Needs

**GOAL: Recruitment**

Increase the quantity, caliber and diversity of workers qualified to enter the state and local public health workforce in needed roles

Objective	Strategies	Launch Year	Responsible Organizations	Resource Requirements
A. Provide information on public health careers to possible students and adults making career changes	1. a. Disseminate kit about public health careers and scholarships for high school and college classroom and career guidance use on behalf of all NYS public health schools/ programs, and undergraduate career offices b. Develop marketing strategy to recruit adults making career changes	2006	NYNJ PHTC NYCDOHMH Academic Centers S//LHDs	Medium Needs
	2. Establish mentoring programs where health department employees mentor high school and community college students from diverse communities to affect the potential pipeline. Establish mechanisms to support employees who provide mentoring	2007	S/LHDs Local colleges and school districts	High Needs
	3. Increase number of undergraduate public health courses, majors and minors	2008	Academic Centers	High Needs
B. Increase diversity of students in MPH programs/schools	1. Develop and implement strategic plan to increase racial/ethnic diversity of students in undergraduate schools and programs that train public health professionals	Develop 2006 Implement 2008	Academic Centers Center for Workforce Studies Student Groups PH Council Ad Hoc Committee	Medium/High Needs
C. Transition public health graduates into public health jobs	1. Increase number and quality of MPH field placements in governmental public health agencies	2006 and Ongoing	S/LHDs Schools	Low/Medium Needs
	2. Increase LHD professionals who are adjunct faculty at SPHs. (Programs and PH courses, e.g. nursing)	2007	Academic Centers S/LHDs	Medium Needs
D. Define & deploy job requirements	1. Review job descriptions and knowledge and skill requirements for public health positions to ensure minimum qualifications are appropriate to today's needs and reflect current public health of communities. (e.g. Review NYS Sanitary Code job descriptions and minimum job qualifications for public health titles)	2006	S/LHDs Civil Service PH Associations PHC	Low Needs

**GOAL: Recruitment** *(continued from previous page)*

Objective	Strategies	Launch Year	Responsible Organizations	Resource Requirements
	2. Ensure that civil service exams are current and assess the skills and knowledge needed for public health positions. Market exam opportunities to encourage participation	2006	S/LHDs, Office of Civil Service	Medium Needs
	3. Improve promotion and advertising efforts to increase visibility of job openings (e.g. post PH government job postings statewide on a website)	2006-7	SHD, Office of Civil Service,	Low Needs
E. Launch financial advocacy plan	1. Educate decision-makers on the need for resources to support public health workforce, including salaries to facilitate recruiting and retaining qualified professionals in public health positions.	2006	PH Associations Deans NYSACHO Student Associations Civil Service	High Needs



**GOAL: Training and Education**

Sustain the skills and competencies of public health workers to enable them to perform in an evolving public health environment.

Objective	Strategies	Launch Year	Responsible Organizations	Resource Requirements
A. Increase access to competency-based training as described by the Council on Linkages. (Core Public Health Competencies developed by the Council on Linkages between Academia and Public Health Practice	1. Better define the competencies required in public health roles, especially in administration (supervision and management), by working with public health workplace leaders, public health practitioners and a broad set of educational providers	2006	PHTC, NEPHLI, other schools and programs of public health, community colleges, other institutions of higher learning, NYSACHO, Center for Workforce Studies	Low Needs
	2. Develop and deliver programs based on the prioritized needs of the public health workforce, especially in administrative tracks (management and supervision). Include professional and technical skills, and tracks that provide career development opportunities for support staff	2007	PHTC, NEPHLI, other schools and programs of public health, community colleges, other institutions of higher learning, NYSACHO, Center for Workforce Studies	High Needs
B. Develop incentives to promote training and education to strengthen public health competencies	1. To increase the number of staff who use available resources for their own development: a. Encourage and facilitate staff use of currently available reimbursement/waiver negotiated benefit programs b. Find new resources to support staff development	2006 2007	S/LHDs	High Needs
	2. Establish formal operational processes for staff development: a. Establish ways that SDOH and LHDs can require that training is in each employee's annual employee work plan as well as a review of how training affected performance b. Add performance measure to annual LHD performance reports to document staff training and development activities	2006 2007	S/LHDs	Low Needs
C. Strengthen workplace/academic partnerships	1. Establish academic/practice partnerships to strengthen preparation and practice of public health professionals a. Establish partnerships that support a high level of public health nursing practice to strengthen preparation of public health nurses in NYS b. Establish partnerships to support changes in minimum qualifications and continuing education requirements for health education titles c. Establish partnerships for other priority titles	2006 2006 2007	Institutions of higher learning; S/LHDs, Civil Service	Low Needs

**GOAL: Retention**

Retain competent and diverse public health workers in public health careers.

Objective	Strategies	Launch Year	Responsible Organizations	Resource Requirements
A. Plan for succession of staff departing departments of health	1. Identify critical positions that may lose incumbents due to retirements/promotions. Identify skills required to perform those functions and provide training/mentoring to staff a. Distribute tool for LHDS to use to conduct succession planning	2006	Center for Workforce Studies Individual health departments	Low Needs
B. Expand development programs for supervisors and managers	1. Train supervisors to be retention oriented and reward them for supporting activities that assist in retaining staff	2006-10	Academics, S/LHDs, PH Leadership Institutes, Professional Organizations, NYSACHO and NYSAC	Medium Needs
C. Build Career Ladders and Foster Career Development	1. Review NYS Sanitary Code job descriptions and minimum job qualifications to examine how the qualifications for specific job titles can be revised to support career levels and mobility	2006	Academics, S/LHDs, PH Leadership Institutes, Professional Organizations, Unions, NYSACHO	Low Needs
	2. Expand certification programs to create pride and professionalism for public health workforce	2006	Academics, S/LHDs	Low Needs
	3. Establish internal opportunities for and reward additional educational achievements	2007	S/LHDs	Medium Needs
D. Make public health jobs more competitive	1. Create more opportunities and communication/media training for staff to be visible in communities and inform the public of the role and value of public health	2006	NYSACHO, S/LHDs	Medium Needs
	2. Develop an internal/external information campaign focused on the positive aspects of working in public health (e.g. employee benefits, lifelong career opportunities in public health)	2008-10	NYSDOH, ASPH, APHA	High Needs
	3. Create more attractive working conditions (e.g. better workspace, availability of current technology) based on survey data	2006-10	S/LHDs	High Needs

## **Public Health Workforce Project Charters**

Project charters have been developed to guide implementation activities. The project charters combine related strategies from each of the four goal areas into nine themes. Professional, academic and governmental public health organizations will serve on work teams to design and implement action plans to achieve the recommended strategies in each theme area. The themes are:

1. Strengthen Academic/Practice Partnerships
2. Strengthen Workplace Policies and Procedures
3. Assess Leadership Skills
4. Define Workforce Competencies and Gaps
5. Market Public Health Careers to College Age Students
6. Market Public Health Careers to Adults and Mid Career Professionals
7. Locate and Advocate for New Resources
8. Hire Staff with Right Skills and Provide Career Development Opportunities
9. Implement Workforce Development Programs

## **Public Health Workforce Project Charter**

### **1. Strengthen Academic/Practice Partnerships**

#### ***Objective***

The purpose of this project is to strengthen the collaboration between the state and local health departments and academic institutions that prepare students for careers in public health. The strategies associated with this project are to:

- Establish and build on academic/practice partnerships to strengthen preparation and practice of public health professionals who work in governmental agencies
- Increase the number of undergraduate public health courses, majors and minors
- Increase the number and quality of MPH field placements in governmental public health agencies
- Increase the number of state and local health department professionals serving as adjunct faculty in programs and schools of public health and other programs that prepare public health professionals (e.g. nursing schools)
- Expand certification programs to create pride and professionalism for the public health workforce

#### ***Desired Outcomes***

- Strengthened public health nursing instruction/education
- Strengthened education and continuing education opportunities for public health educators
- Increased number of undergraduate public health courses, majors and minors
- Increased number and quality of MPH field placements in local and state public health agencies
- Increased number of state and local health department staff serving as adjunct faculty in programs that prepare public health professionals
- Increased number of certification programs for public health professionals

#### ***Team Composition***

- Undergraduate and graduate programs
- State and local health department staff
- NYNJ PHTC

#### ***Deliverables***

The team will develop and begin to implement:

- Project action plans that include activities and tasks for each strategy, timing and responsible parties
- Outcome-based metrics

This information will be reported to the Public Health Workforce Taskforce by fall, 2006 and periodically thereafter.

## **Public Health Workforce Project Charter**

### **2. Strengthen Workplace Policies and Procedures**

#### ***Objective***

The purpose of this project is to assure that current policies, practices and operations of state and local health departments support efforts to strengthen the public health workforce. The strategies associated with this project are to:

- Encourage and facilitate staff use of currently available tuition reimbursement/waiver negotiated benefits
- Use the annual performance appraisal process to strengthen staff development by requiring training in every employee's annual performance plan, building public health competencies into the plan, and annually reviewing how training has affected performance
- Add a staff training and development performance measure to the annual LHD performance report
- Disseminate best practices used by LHDs to support workforce development and support and reward staff for educational achievements
- Train and reward supervisors for implementing retention-oriented activities
- Grow leaders by identifying the work activities/experience needed by leaders and rotate staff through these activities

#### ***Desired Outcomes***

- Increased number of staff using negotiated benefits to obtain training and education
- Performance appraisal systems that support and reinforce the development of staff
- Reward and recognition systems for employees' education and achievements
- Report of proven policies, procedures and practices to support workforce development in health departments
- Potential leadership candidates with experiences across the organization

#### ***Team Composition***

- State and local health departments
- NYNJ PHTC
- Undergraduate and graduate programs
- NEPHLI

#### ***Deliverables***

The team will develop and begin to implement:

- Project action plans that include activities and tasks for each strategy, timing and responsible parties
- Outcome-based metrics

This information will be reported to the Public Health Workforce Taskforce by fall, 2006 and periodically thereafter.

## **Public Health Workforce Project Charter**

### **3. Assess Leadership Skills**

#### ***Objective***

The purpose of this project is to provide the tools to support a leadership quality improvement process in state and local departments of health to assure that leaders have the necessary skills to deal with a constantly changing public health environment. The strategies associated with this project are to:

- Develop an appropriate leadership self-assessment tool
- Use table top and inbox exercises to test leaders
- Evaluate and improve leadership training

#### ***Desired Outcomes***

- An increased number of appropriately prepared and tested leaders in state and local health departments.

#### ***Team Composition***

- Undergraduate and graduate programs
- NEPHLI
- State and local health departments

#### ***Deliverables***

The team will develop and begin to implement:

- Project action plans that include activities and tasks for each strategy, timing and responsible parties
- Outcome-based metrics

This information will be reported to the Public Health Workforce Taskforce by fall, 2006 and periodically thereafter.

## **Public Health Workforce Project Charter**

### **4. Define Workforce Competencies and Gaps**

#### ***Objective***

The purpose of this project is to better define the competencies that training and development should address. The strategies associated with this project are to:

- Use nationally recognized frameworks including the Public Health Competencies developed by the Public Health Foundation Council on Linkages to guide clarification and enhanced definitions of workforce competencies
- Focus on identifying the competencies required for public health leaders, supervisors, and managers.
- Use a comprehensive enumeration strategy to identify workforce needs
- Assess the gaps in competencies of the current workforce
- Prioritize the training and development needs of the workforce to guide training and development efforts.

#### ***Desired Outcomes***

- Increased access to needed competency-based training
- Increase the number of appropriately tested and prepared leaders in governmental public health positions

#### ***Team Composition***

- State and local health departments
- NYNJ PHTC
- Undergraduate and graduate programs
- NEPHLI
- Professional Organizations
- NYSACHO and NYSAC

#### ***Deliverables***

The team will develop and begin to implement:

- Project action plans that include activities and tasks for each strategy, timing and responsible parties
- Outcome-based metrics

This information will be reported to the Public Health Workforce Taskforce by fall, 2006 and periodically thereafter.

**Public Health Workforce Project Charter**  
**5. Market Public Health Careers to College Age Students**

***Objective***

The purpose of this project is to increase the number of students who enter public health undergraduate and graduate programs and choose to go into a governmental public health career upon graduation. The strategies associated with this project are to:

- Disseminate a kit on public health careers, career guidance and scholarships to high school and college classrooms on behalf of all NYS schools /programs of public health.
- Establish and support mentoring programs where health department employees mentor high school and community college students, particularly those from diverse communities
- Develop and implement strategic plans to increase the diversity of students in schools and programs that educate public health professionals.

***Desired Outcomes***

- Students who are better informed about what a career in public health is.
- Enrollments in public health programs with increased racial/ethnic diversity

***Team Composition***

- Undergraduate and graduate programs
- NYNJ PHTC
- State and local health departments

***Deliverables***

The team will develop and begin to implement:

- Project action plans that include activities and tasks for each strategy, timing and responsible parties
- Outcome-based metrics

This information will be reported to the Public Health Workforce Taskforce by fall, 2006 and periodically thereafter.



**Public Health Workforce Project Charter**  
**6. Market Public Health Careers to Adults and Mid-Career Professionals**

***Objective***

The purpose of this project is to increase the number of adults and mid-career professionals who choose to enter a governmental public health career. The strategies associated with this project are to:

- Create more opportunities for health department staff to be visible in the community and thus inform citizens of the value of public health
- Train public health employees in working with the media so they might be better ambassadors for public health careers
- Develop an information campaign for use within and outside the workplace which focuses on the positive aspects of working for a public health department
- Expand efforts to publicize job opportunities in public health

***Desired Outcomes***

- Increased number of job seekers considering public health jobs
- Increased access to information about public health job opportunities for job seekers

***Team Composition***

- State and local health departments
- NYNJ PHTC
- Undergraduate and graduate programs
- ASPH and APHA
- NYS Office of Civil Service

***Deliverables***

The team will develop and begin to implement:

- Project action plans that include activities and tasks for each strategy, timing and responsible parties
- Outcome-based metrics

This information will be reported to the Public Health Workforce Taskforce by fall, 2006 and periodically thereafter.

**Public Health Workforce Project Charter**  
**7. Locate and Advocate for New Resources**

***Objective***

The purpose of this project is to make public health government jobs more competitive for new employees and to retain current employees. The strategies associated with this project are to:

- Create more attractive working conditions
- Educate decision makers on the need for additional resources to support the public health workforce
- Find new resources to support training and development activities

***Desired Outcomes***

- An improved work environment for employees
- A financial advocacy plan
- Increased incentives for employee participation in training and education

***Team Composition***

- Deans of undergraduate and graduate programs
- NYSACHO
- State and local health departments
- PH Associations
- Student Associations

***Deliverables***

The team will develop and begin to implement:

- Project action plans that include activities and tasks for each strategy, timing and responsible parties
- Outcome-based metrics

This information will be reported to the Public Health Workforce Taskforce by fall, 2006 and periodically thereafter.

## **Public Health Workforce Project Charter**

### **8. Hire Staff with the Right Skills and Provide Career Growth and Development Opportunities**

#### ***Objective***

The purpose of this project is to assure that systems are in place to recruit employees with needed competencies and to support their career development and growth. The strategies associated with this project are to:

- Periodically review job descriptions and knowledge and skill requirements to reflect current and future needs
- Periodically assess the need for and the requirements of job titles which support career advancement
- Assure that civil service testing reflects required competencies
- Assure that leadership competencies are included in civil service tests for leadership positions.

#### ***Desired Outcomes***

- Available career ladders to foster career development
- Job title qualifications appropriate for current needs
- Increased number of appropriately prepared and tested leaders

#### ***Team Composition***

- Undergraduate and graduate programs
- NYSACHO and NYSAC
- State and local health departments
- PH Associations
- Student Associations
- NEPHLI
- Unions
- Civil Service

#### ***Deliverables***

The team will develop and begin to implement:

- Project action plans that include activities and tasks for each strategy, timing and responsible parties
- Outcome-based metrics

This information will be reported to the Public Health Workforce Taskforce by fall, 2006 and periodically thereafter.

**Public Health Workforce Project Charter**  
**9. Implement Workforce Development Programs**

***Objective***

The purpose of this project is to assure the competencies of the workforce are sustained. The strategies associated with this project are to:

- Develop and implement programs based on the prioritized needs of the workforce, especially in administrative and leadership tracks at all levels of the organization
- Provide mentoring and training to staff filling positions of departing staff

***Desired Outcomes***

- Increased access to competency-based training
- Increased number of appropriately trained public health employees
- Increased number of appropriately prepared and tested leaders in state and local health departments.

***Team Composition***

- Deans of Undergraduate and graduate programs
- NYSACHO
- State and local health departments
- PH Associations
- Unions

***Deliverables***

The team will develop and begin to implement:

- Project action plans that include activities and tasks for each strategy, timing and responsible parties
- Outcome-based metrics

This information will be reported to the Public Health Workforce Taskforce by fall, 2006 and periodically thereafter.

## Attachment A: Current Training and Development Opportunities

UASPH [www.albany.edu/sph/coned/](http://www.albany.edu/sph/coned/)

Learning Opportunity	Developed by	Format	Target	Description	Academic Credit	Evaluation/ Participation Data
Foundations of Public Health Practice Certificate**	UASPH	Traditional classroom /satellite /Web-based	Public health workers with limited formal education or training in public health	Provides foundation knowledge in public health through a mix of traditional and distance learning venues  Included core requirements and electives	No	2 recipients 21 enrolled
Introduction to Public Health in New York State** (first module of Foundations of Public Health Practice Certificate	UASPH	Traditional Classroom; Curriculum available at <a href="http://www.NYNJ-PHTC.org">www.NYNJ-PHTC.org</a>	New public health employees or workers with limited formal education or training in public health	Topics include a history of public health, the core functions and essential services of public health, professional ethics, and the legal basis and organization of public health in NYS	No	75-100 per year since 2001
Public Health Fundamentals and Principles	UASPH	Traditional classroom /Web-based	Public health workers with limited formal education or training in public health	A set of 6 graduate level courses that can be completed in traditional or on-line venues  Successfully completed courses may be applied to the MPH program	Yes	16 enrolled
Academic health department exchange program	UASPH	Web-based	SPH interns  LHD employees	MPH interns work in LHDs  LHD professionals take online UASPH courses	Yes	6 Interns 2 LHD professionals

*UASPH Table continued next page*

\*\* Part of the MOU between SDOH and UA SPH

**UASPH** (continued from previous page)

<b>Learning Opportunity</b>	<b>Developed by</b>	<b>Format</b>	<b>Target</b>	<b>Description</b>	<b>Credit</b>	<b>Evaluation/ Participation Data</b>
Basic Environmental Health Course (BEHC)**	NYSDOH and UASPH	Traditional Classroom – Regional Workshops with field exercises and web-based module	Entry-level environmental health personnel with basic competencies and understanding to perform their responsibilities	The BEHC consists of 10 modules, including: An Introduction to Public Health  Microbiology, communicable disease, public health chemistry and toxicology, pest management and vectors, testimony and enforcement, food protection and sanitary survey of public water supplies	No	50-100 per year since 2002 in this format – Course dates back to early 1900’s
Best Practices in Confidentiality**	UASPH	Traditional Classroom	All public health employees	Best practices in maintaining confidentiality when working in a in public health office	No	
Third Thursday Breakfast Broadcasts (T2B2)**	UASPH originally through Turning Point grant	Satellite monthly; Web-streamed; videotape & tape lending libraries	Statewide and National public health professionals	Continuing education opportunities on various current public health issues.	CME, CHES, nursing contact hrs.	53 NYS LHDs registered as downlink sites plus sites in 46 states
Women’s Health Grand Rounds	UASPH	Satellite and Web-streamed	Professionals dealing with Women’s health issues	Clinical experts paired with public health experts to provide continuing medical education on current women's health issues with both clinical and public health significance	CME, CHES, nursing contact hrs.	

*UASPH Table continued next page*

\*\* Part of the MOU between SDOH and UA SPH

**UASPH** (continued from previous page)

<b>Learning Opportunity</b>	<b>Developed by</b>	<b>Format</b>	<b>Target</b>	<b>Description</b>	<b>Credit</b>	<b>Evaluation/ Participation Data</b>
Center for PH Preparedness Grand Rounds	UASPH	Satellite monthly and Web-streamed	All public health workers	Monthly broadcasts on timely public health emergency preparedness issues.	CME, CHES, nursing contact hrs.	50 states, 450 downlink sites
Terrorism, Preparedness and Public Health: An Introduction	UASPH	Web-based	Broad range both inside and outside of public health	Provides and understanding and awareness of terrorism and its effect on public health	CME, CHES, nursing contact hrs.	6,500 registrations, 2,700 completions 24 job titles 16% first responders 15% nurses 10% bioterrorism units
Northeast Regional Public Health Leadership Institute	UASPH	In Person	PH professionals with leadership potential	Experiential program to build and improve leadership skills	No	

\*\* Part of the MOU between SDOH and UA SPH

**NY-NJ PHTC [nynj-phtc.org/](http://nynj-phtc.org/)**

<b>Learning Opportunity</b>	<b>Developed by</b>	<b>Format</b>	<b>Target</b>	<b>Description</b>	<b>Credit</b>	<b>Evaluation/ Participation Data</b>
Orientation to Public Health	NYNJ PHTC	Web-based	Primary: newly hired support and technical field staff  Secondary: PH professionals with limited formal PH training and education	Provides a basic understanding of public health mission and function	No	Over 4,000 completions since 2/03. 54% from health departments. Rated as high quality by 94%.
Exploring Cross-Cultural Communication	NYNJ PHTC	Web-based	All PH professional employees	Through 3 interactive scenarios, participants develop a foundation for effective communication	CME, CHES, nursing contact hrs.	Over 750 completions since 9/04. 40% from health depts. Rated as high quality by 91%
Practicing Cross-Cultural Communication	NYNJ PHTC	Web-based	All PH professional employees	3 case studies allowing participants to practice the cross-cultural communication skills learned in the “Exploring” program	CME, CHES, nursing contact hours	156 completions in the first three months. Rated as high quality by 93%.
Environmental health & health promotion case based modules	NYNJ PHTC	Web- based	All PH professionals with limited background in EH or HP	Analysis of real world problems through case scenarios	CHES	183 completions as of 1/06. Course evaluations note that the programs are “interactive and engaging”
Continuing Education Plan	NYNJ PHTC	Web	All PH professional employees	Portal to over 100 distance-accessible training programs for public health professionals, catalogued by Council on Linkages Core Competencies for Public Health Professionals	Individual courses may provide CE’s	



## New York State Nurses Association

Learning Opportunity	Developed by	Format	Target	Description	Credit	Evaluation/ Participation Data
Public/ Community Health Nursing Orientation	NYS Nurses Association, NYS Turning Point Initiative through NYSDOH	Web-based <a href="http://web2.sedonamg.com/nysna/courselist.aspx?s=67">http://web2.sedonamg.com/nysna/courselist.aspx?s=67</a>	Public Health Nurses	An introduction to principles of public health and community health nursing	No	623 people took course from 11/ 2003 – 12/2004. Evaluation indicated course participants found it was very good.

## **Attachment B: Training Collaborations/Initiatives**

In the last 5 years, New York State has engaged in a set of collaborative training initiatives to address recruitment, training and retention issues. The NYS Department of Health, the New York State Association of County Health Officers (NYSACHO), the University at Albany School of Public Health and Columbia University Mailman School of Public Health and Columbia University School of Nursing Center for Health Policy have served as core partners in efforts to build and sustain a competent public health workforce.

The **New York-New Jersey Public Health Training Center (NY-NJ PHTC)** is a multi-year program funded by the Health Resources Services Administration. (HRSA). The Center accomplishes its work in collaboration with three schools of public health: Columbia University Mailman School of Public Health, University at Albany School of Public Health, and University of Medicine and Dentistry of New Jersey-School of Public Health. In addition, the Center partners with the New York State Department of Health, the New York City Department of Health and Mental Hygiene, the New Jersey Department of Health and Senior Services, and local health departments throughout New York and New Jersey. The mission of the Center is to enhance the ability of the current and future public health workforce to effectively deliver the Essential Public Health Services to communities throughout New York and New Jersey.

The Center facilitates access to appropriate quality training for the current public health workforce in the two states. Center staff and Advisory Committee members review existing public health training programs as they become available or are identified. Quality training programs that are distance-accessible are added to the Center's Continuing Education Plan. The Center also creates or adapts appropriate public health training courses, including both distance learning and traditional classroom-based programs. Specific training programs are described in Attachment A. Programs developed by the Center are also posted to the TRAIN national database.

The NYNJ PHTC is collaborating with the 13 other Public Health Training Centers to form the National Public Health Training Center Network. One of the five goals of the Network is to improve the quality and outcomes of public health training. To achieve this goal, and in the face of limited resources, the National PHTC has committed to collaborate in designing a culturally competent core curriculum; and to make this curriculum available for the broadest audience possible via accessible delivery media. The NYNJ PHTC is taking a lead role in beginning the process of identifying accessible, competency-based training programs that have been developed by Network members. Once identified, the Center will insert the access information for each program in an electronic version of the Center's Continuing Education Plan. The completed matrix can then be used by Network members to determine where significant training gaps exist. As gaps are identified, Centers can plan collaborative training initiatives building on the strengths and resources of each Center.

To date, the NYNJ PHTC has completed a training needs and technology capacity assessment of close to 1,900 professional public health workers from the two states and provided tailored training to nearly 33,000 people; approximately 24,800 via distance learning and 8,200 through in-person programs. The Center uses the Core Competencies for Public Health Professionals developed by the Council on Linkages between Academia and Public Health Practices as a framework for its activities. There are three ways the Center works to achieve its mission: 1) by providing readily accessible, competency-based continuing education programs tailored to meet the high priority training needs of the current New York and New Jersey public health workforce; 2) by improving access to a diverse and culturally competent future public health workforce; and, 3) by collaborating with the 13 other Public Health Training Centers, and similar organizations, to inform state and local policy and practice on public health workforce development and credentialing.

**The Northeast Regional Public Health Leadership Institute (NEPHLI)**, supported by the Centers for Disease Control and Prevention, resides in the University at Albany School of Public Health (UASPH). NEPHLI is a year-long program that builds and improves the leadership skills of emerging leaders from state and local public health departments and allied public and private organizations. NEPHLI provides participants with opportunities to gain practical experience from experts in a variety of fields. A range of leadership topics are included, such as influencing others, measuring and improving public health performance, developing collaborative relationships and partnerships, team building, group problem solving, responding to the needs for cultural diversity and competence, and addressing the training needs of the public health workforce. Scholars also learn to evaluate their own potential for leadership and their leadership styles. Curricula are tailored to meet the needs of Scholars and address issues important to their personal growth and to building healthier communities. The NYNJ PHTC is currently mentoring two local health department NEPHLI scholars.

**Center for Health Workforce Studies:** The CHWS is a not-for-profit research organization that conducts studies of the supply, demand, use and education of the health workforce in order to understand workforce dynamics and trends and inform public policies, the health and education sectors and the public. The CHWS is one of six regional centers devoted to health workforce studies with a cooperative agreement with HRSA/Bureau of Health Professions. The Center is currently engaged in conducting an enumeration of the local public health workforce in New York State.

**Office of Local Health Services at the NYS DOH** builds capacity and strengthens the skills within the community and public health infrastructure. The office represents NYSDOH's high level of focus on public health workforce development. Supported by the Robert Wood Johnson Foundation's Turning Point, OLHS partnered with NYSACHO, University of Albany, School of Public Health and others to develop and deliver distance learning training accessible on a statewide basis. Both satellite and on-line training opportunities were developed. OLHS is the CDC's-designated distance learning coordinator responsible for facilitating access to CDC and other public health distance learning opportunities. Monthly lists of satellite broadcasts and Webcast are

disseminated through an electronic distance learning newsletters. The E-Distance Learning Communiqué promotes general public health offerings. Live satellite broadcasts are available to any worksite with an appropriate satellite dish. Most broadcasts are available for videoconferencing through NYSDOH offices and Local Health Department offices. NYSDOH has institutionalized funding to support workforce development through a formal agreement between the School of Public Health at Albany (SPH) and a number of programs in State DOH to design, develop and deliver continuing education programs for the state's public health workforce. A number of SDOH organizational units blended resources to support the common services necessary to provide professional development opportunities, such as registration, evaluation and instructional design systems.

**The Centers of Public Health Preparedness** were created in 2000, as a result of partnership efforts between the Centers for Disease Control and Prevention, the Association of Schools of Public Health, state and local agencies, and other academic and community partners. Columbia University Mailman School of Public Health and the University at Albany, School of Public Health serve as New York State's Centers, whose mission is to improve the capacity of the public health workforce to respond to current and emerging public health threats. Their overall goal is to serve as a resource for integrated public health training and workforce development, with a special emphasis on preparing the frontline public health workforce to deal with emergencies and the special threats posed by bioterrorism, infectious diseases, bioterrorism, and other emergency situations. Training includes traditional classroom-based and distance learning opportunities.

The **New York State Association of County Health Officials (NYSACHO)** is a statewide association representing each of the 58 local health departments in New York. The membership includes health commissioners, public health directors, deputy commissioners, environmental health directors and directors of patient services. Through the dissemination and discussion of important information at monthly meetings and other forums, NYSACHO strengthens the provision of local public health programs and services. In addition to serving as the advocate for public health in New York State, NYSACHO provides a full array of education and training programs through a variety of grants. Activities include an annual statewide public health conference, an annual Commissioners/Directors retreat, orientation for new health commissioners and public health directors and sponsorship of student interns to assist in statewide immunization activities. NYSACHO is also a founding partner of the Third Thursday Breakfast Broadcast (T<sup>2</sup>B<sup>2</sup>), a monthly live satellite broadcast that provides continuing education opportunities for public health professionals and others.

**ATTACHMENT C  
NEW YORK STATE PUBLIC HEALTH WORKFORCE TASKFORCE  
TASKFORCE MEMBERSHIP**

**NYS Department of Health**

Patricia Anders, MS  
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Emergency Preparedness Training

Dennis Croswell  
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Dale Morse, MD, MS  
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Workforce and Community Health

**Northeast Regional Public Health  
Leadership Institute**

Dwight Williams, MSW (2)  
Director – NEPHLI  
Clinical Associate Professor  
School of Public Health

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*Facilitator – Nancy Schultz, MBA*

***Committees***

*Vision, Mission and Goals (1)*  
*Recruitment Goals, Strategies, Activities (2)*

*Training and Education (3)*  
*Retention (4)*