Abstract

The purpose of this project is to detail the results of a workforce competency assessment administered to employees of the North Central Health District (NCHD). The survey was used as a follow up to an assessment conducted approximately 4 years ago by six executive level NCHD employees. The current assessment was made available to 248 district employees. The response rate for the completed survey was 77%. Tier 1 and Tier 2 respondents indicated an awareness of all eight key dimensions. Tier 3 respondents had an awareness of two dimensions and knowledgeable of the other six. Recommendations were made to increase workforce development initiatives and expand the workforce to include more people formally trained in public health.

Methods

The competency assessment used for this research was the Competency Assessment for Tier 1 and 2 Public Health Professionals (Place, 2012). It is a self-assessment survey provided by the Council on Linkages Between Academia and Public Health Practice. The survey allowed respondents to rate their level of knowledge on a scale of 1-4. A rating of 1 indicates ‘None’ or limited knowledge of the dimension. A rating of 2 indicates ‘Aware’ of the dimension, 3 indicates ‘Knowledgeable’ and 4 indicates ‘Proficient’. The participants were assessed in the following eight dimensions, with several indicators listed under each dimension: Analytical/Assessment, Policy Development/Program Planning, Cultural Competency, Community Dimensions of Practice, Public Health Sciences, Financial Planning and Management and Leadership and Systems Thinking. There is a separate assessment for each of the 3 tiers of public health professionals. The paper based survey was manually transcribed into survey software. A letter explaining the survey was drafted in collaboration with the NCHD Health Promotions Coordinator and distributed with the survey link via email to all 248 NCHD employees that participated in the survey. The letter explained the reason for the survey and explained how results would be used to develop workforce development programs. The letter also discussed the importance of having a competent workforce by listing the Ten Essential Public Health Services. The survey took place at the work site of each employee. The NCHD Human resources director categorized all employees by tier to ensure that each employee received the correct assessment. The Health Promotions coordinator assisted by creating email groups for employees in each tier. Employees were given ten days to complete the survey. All surveys and data collection was done using Qualtrics software.

Results

The competency assessment was distributed to 248 NCHD employees, 205 of whom received the Tier 1 survey, 34 of whom received Tier 2 and 9 received Tier 3. A total of 158 surveys were completed (n=128 for Tier 1, n=24 for Tier 2, n=6 for Tier 3), a response rate of 77%. A total of 50 surveys were started but not completed. Approximately 30 employees did not have a district email address and were not included in the survey. Of participants that completed the survey, 12 were male and 129 were female. Racial demographics indicated 84 participants were African American, 81 were White and 3 selected ‘Other’ as race but did not specify race. In addition, 9 participants identified as ‘Hispanic’ while the remaining participants identified as ‘Not Hispanic’. Also 40 participants have a high school diploma only, while 26 have an Associate’s degree. Moreover 4 respondents have a Bachelor of Science in Public Health/Community Health, 55 have a Bachelor of Science in a field outside of Public Health/Community Health, 7 have a Master’s degree in Public Health and 12 have a Master’s degree in another subject. No survey participants selected education beyond a Master’s degree.

Conclusions or Recommendations

Results of this research indicate that Tier 1 and Tier 2 employees self-assess as having an awareness of each dimension, while Tier 3 employees self-assess as being knowledgeable in all areas with the exception of Analytical/Assessment Skills and Public Health Science Skills, where they indicated having an awareness of each dimension. No group assessed themselves as being proficient in any area. In addition to this, the NCHD workforce is aging, with approximately 32% of the workforce being over 50 years of age and 25% having worked in public health for fifteen years or more. Furthermore, results indicate that over 60% of NCHD employees have no formal public health training. In addition to implementing workforce development programs, the district has an opportunity to recruit persons with formal public health training to replace those that are retiring.

This project serves as a foundation to build a quality workforce development plan so that all employees can progress from a level of awareness to proficiency in all key dimensions.

References


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