New to Public Health
RESIDENCY PROGRAM™

Pilot testing: currently underway

Cohort 1: September 2021 | Cohort 2: January 2022

Global objectives:

By the end of the residency program, the new public health professional will:

1. Apply learned concepts from the Foundational Public Health Services model to their public health professional practice.
2. Increase knowledge, skills, and confidence for competent public health practice.
3. Access tools and resources applicable to public health practice.
4. Apply health equity and social justice concepts to public health practice.
5. Demonstrate enhanced cultural competency knowledge and skills in their individual practice.
6. Research, plan, and present a quality improvement or evidence-based practice project within their local health department or community.

A competent public health workforce of sufficient size and diversity is a core requirement for community and population health improvement. The 2017 Public Health Workforce Interests and Needs Survey (PHWINS) revealed that despite overall high job satisfaction, almost half of public health workers were considering leaving their jobs, citing level of pay, lack of opportunity for advancement, poor workplace environments, lack of rewards for creativity, poor communication, or retirement[1]. The covid-19 pandemic is creating new challenges for the existing workforce including anecdotal evidence of increased burnout and turnover due to a primary focus on crisis response versus the breadth of all public health services.

Program design:

The New to Public Health (N2PH) Residency Program is an innovative, 12-month, professional development program designed to support new public health professionals transitioning into a governmental public health agency. The program aims to augment usual orientation practices and support the development of new employees.

Each session is comprised of the following:

- Pre/post knowledge check assessment
- interactive self-paced online learning activities
- discussion post(s)
- case studies
- a scavenger hunt to find local, regional, or state specific policy, procedures, data or resources
- synchronous facilitated discussion
- reflective journaling prompts

Participants of the program will also be matched with an informal mentor, participate in a public health simulation, and have the opportunity to complete a quality improvement or evidence-based practice project. Each session will be awarded approximately 10 contact hours.

Framework and Evaluation:

The N2PH Residency Program is based off the Foundational Public Health Services model. Each session focuses on a particular Foundational Area or Capability and aims to meet the model's objectives.[2]

The N2PH Residency Program also follows the CDC Quality Training Standards to assess, create, and evaluate engaging learning opportunities designed to be usable and accessible for all.

Residents will complete the Tier 1 Competency Assessment and an adapted Casey Fink Nurse Retention Survey prior to, midway, and upon completion of the N2PH Residency Program. Monthly session evaluations are also administered.

Intended Outcomes:

The N2PH Residency Program will be the first accredited online residency program for public health professionals in their first year of employment in a governmental health department. Participants who complete the program will be supported in their critical transition time in ways that result in:

- greater competency for evidence-based public health practice,
- enhanced confidence for addressing the challenges of public health work,
- high satisfaction with their new jobs and clear intentions to remain in public health practice, thus reducing organizational costs associated with turnover.

Health departments and the public will benefit through enhanced training opportunities for new employees, improved retention of confident and competent public health professionals committed to serving their communities, and improved workplace culture.

References:

1. De Beaumont Foundation and Association of State and Territorial Health Officials. 2019. Public Health Workforce Interests and Needs Survey: 2017 National Findings. Retrieved from https://www.debeaumont.org/wp-content/uploads/2019/04/PH-WINS-2017.pdf
2. Public Health National Center for Innovations (PHNCI). Foundational public health services in action. PHNCI. https://phnci.org/national-frameworks/fphs. Published November 2018.

New To Public Health
RESIDENCY PROGRAM
UNIVERSITY OF WISCONSIN–MADISON

Session 1: Public Health Overview

- Detail the history of public health services delivered in the United States
- Identify common public health practice models, including the Foundational Public Health Services Model
- Describe legal principles, scope, and the role of government within public health practice
- Demonstrate the use of plain language in public health
- Discuss the importance of reflection in professional practice

Activity

- Assessments/Evaluation
  - Tier 1 Competency Assessment
  - Casey-Fink Retention Survey
- Public Health 101
  - Video: *What Is Public Health*
  - Online Training: CDC *Public Health 101*
- Evidence-Based Public Health
  - Video: Evidence-Informed Decision Making: A Guiding Framework for Public Health
  - Reading: ASTHO *Evidence-Based Public Health Issues and Concepts*
- Foundational Public Health Services Model and Other Public Health Practice Models
- Introduction to Public Health Law, Policy, And Ethics
  - Reading: Public Health Code of Ethics
  - Online Training: Region 2 Public Health Training Center's *an Overview of The Policy Process In Public Health*
  - Scavenger Hunt
- Public Health Communication
  - Online Training: Health Literacy for Public Health Professionals
  - Readings: PHRASES Reframed Answers to Tough Questions About Public Health And "When You Say…They Think"
  - Introduction to Reflection
- Synchronous Discussion: Resiliency and Empowerment Of The Public Health Profession

N2PH

Session 2: Communicable Disease

- Explain how public health provides timely, statewide, locally relevant and accurate information to the health care system and community on communicable diseases and their control.

- Identify statewide and local communicable disease control community partners and their capacities.

- Describe how public health receives laboratory reports and other relevant data, conducts disease investigations including contacting tracing and notification, and recognizes, identifies and responds to communicable disease outbreaks for notifiable conditions in accordance with local, national and state mandates and guidelines.

- Determine how public health assures the availability of partner notification services for newly diagnoses case of syphilis, gonorrhea, and HIV according to CDC guidelines.

- Define how public health assures the appropriate treatment of individuals who have active tuberculosis, including the provision of directly-observed-therapy in accordance with local and state laws and CDC guidelines.

- Explain how public health supports the recognition of outbreaks and other events of public health significance by assuring capacity for the identification and characterization of the causative agents of disease and their origin, including those that are rare and unusual, at the appropriate level.

- Recognize how public health coordinates and integrates categorically-funded communicable disease programs and services.
- Ability to access 24/7 laboratory resources capable of providing rapid detection.
- Ability to prioritize and respond to data requests, including vital records, and to translate data into information and reports that are valid, statistically accurate, and accessible to the intended audiences.

Activity

- Communicable Disease 101
  - Interactive Learning Activity
  - Scavenger Hunt
- Surveillance and Disease Investigation
  - Interactive Learning Activity
- Contact Tracing
- Epidemiology 101
- Motivational Interviewing
- Electronic Disease Surveillance
  - Reading: How Sharing Data Digitally Benefits Health
  - State Specific Resources
  - Discussion Post
- Tuberculosis 101
- Sexually Transmitted Disease
- Synchronous Discussion: Motivational Interviewing

N2PH

⚖️ Session 3: Health Equity

- Articulate how class, racism, and disempowerment impact health and wellbeing.
- Identify how programs, policies, and practices within the five domains of the Healthy People 2030's Social Determinants of Health (economic stability, education, health care, neighborhood/built environment, social and community context) positively or negatively impact the health of individuals, families, and communities.
- Strategically coordinate health equity programming through a high level, strategic vision and/or subject matter expertise which can lead and act as a resource to support such work across the department.
- Evaluate how public health can address gender biases and achieve health equity for LGBTQ+ people.
- Detail the levels of the Social Ecological Model of Health and how public health can intervene at various levels to improve health outcomes.

Activity
- Health Equity 101
- Social Determinants of Health
- Unnatural Causes
    - Video: Episode 1 *In Sickness and In Wealth*
- Roots of Health Inequity
- Racism
- Implicit Association Test
- Unconscious Bias
    - Reading: The Historical Origins and Development of Racism And Ten Things Everyone Should Know About Race.
- LGBTQ+ Health
- Community Engagement
- Cultural Awareness and Humility
    - Video: Cultural Awareness: Introduction to Cultural Competency and Humility
- Synchronous Discussion: Unnatural Causes

N2PH

- Provide timely, statewide, and locally relevant and accurate information to the health care system and community on chronic disease and injury prevention and control.
- Identify statewide and local chronic disease and injury prevention community partners and their capacities, develop and implement a prioritized prevention plan, and seek funding for high priority initiatives.
- Reduce statewide and community rates of tobacco use through a program that conforms to standards set by state or local laws and CDC's Office on Smoking and Health, including activities to reduce youth initiation, increase cessation, and reduce secondhand smoke exposure, as well as exposure to harmful substances.
- Work actively with statewide and community partners to increase statewide and community rates of healthy eating and active living through a prioritized approach focusing on best and emerging practices aligned with national, state, and local guidelines for healthy eating and active living.
- Coordinate and integrate categorically-funded chronic disease and injury prevention programs and services.
- Ability to engage members of the community in a community health improvement process that draws from community health assessment data and establishes a plan for addressing priorities. The community health improvement plan can serve as the basis for partnership development and coordination of effort and resources.

Activity

- Chronic Disease Overview
- Nutrition, Physical Activity, & Obesity Prevention
- Tobacco Prevention
  - Readings, Videos and Resources
- Alcohol Prevention
  - Readings, Videos and Resources
- Injury Prevention
- Behavior Change Models
- Chronic Disease and Injury Prevention Showcase
- What Works for Health
- Health People 2030
  - Reading: Healthy People 2030 In Your Work
- CHA & CHIP Overview
- Synchronous Discussion: CHA/CHIP Activity

N2PH

- Provide timely, statewide, and locally relevant and accurate information to the state, health care system, and community on environmental public health issues and health impacts from common environmental or toxic exposures.
- Identify statewide and local community environmental public health partners and their capacities, develop and implement a prioritized plan, and seek action funding for high priority initiatives.
- Identify public health goals accomplished through environmental public health activities including laboratory testing, inspections, and oversight to protect food, recreation sites, and drinking water; manage liquid and solid waste streams safely; and, identify other public health hazards related to environmental factors in accordance with federal, state, and local laws and regulations.
- List ways to protect workers and the public from chemical and radiation hazards in accordance with federal, state, and local laws and regulations
- Participate in broad land use planning and sustainable development to encourage decisions that promote positive public health outcomes (e.g. housing and urban development, recreational facilities, and transportation systems) and resilient communities.
- Coordinate and integrate categorically-funded environmental public health programs and services.

Activity

- Introduction to Environmental Health
- The Built Environment
  - Reading: The Built Environment and Its Relationship To The Public's Health: The Legal Framework
  - Video: *Why Managing Chronic Health Conditions Begins at Home*
  - *Reading: The Socio-Economic Significance of Food Deserts*
  - *Walk Score*
- Food Safety
  - Readings, Videos and Resources
  - Case Study
- Drinking Water
  - Readings, Videos and Resources
- Liquid and Solid Waste Management
  - Readings, Videos and Resources
- Lead
  - Readings, Videos and Resources
  - Video: Lead Assessment

…..Continued….

- Chemical and Radiation Hazards
  - Readings, Videos and Resources
  - Video: Pesticides
- Radon
  - Readings, Videos and Resources
  - Case Study
- Recreational Activities
  - Pools
  - Beaches
  - Campgrounds
- Hoarding Disorder
  - Readings, Videos and Resources
  - Case Study
- Rabies and Vector Control
- Climate Change
- Synchronous Discussion: Toxics, Climate Change, And Environmental Justice

N2PH

Session 6: Accountability and Performance Management

The content areas covered in Session 6 include:

- Ability to perform according to accepted business standards and to be accountable in accordance with applicable relevant federal, state, and local laws and policies and to assure compliance with national and Public Health Accreditation Board Standards.
- Ability to identify and use evidence-based and/or promising practices when implementing new or revised processes, programs and/or interventions at the organizational level.
- Ability to maintain an organization-wide culture of quality improvement using nationally recognized framework quality improvement tools and methods.
- Ability to establish a budgeting, auditing, billing, and financial system and chart of expense and revenue accounts in compliance with federal, state, and local standards and policies.
- Ability to secure grants or other funding (governmental and not) and demonstrate compliance with an audit required for the sources of funding utilized.

Activity
- Assessment
    - o Tier I Core Competency Assessment
- Overview of Accountability and Performance Management
    - o Scavenger hunt
- Quality Improvement
- Evidence Based Practice
    - o Readings and resources
- Models, Tools, Methods
    - o Readings and resources
- Programmatic Budgets and Funding
- Program Planning and Evaluation
- Public Health Accreditation
- Translating Evidence to Practice
    - o Quality improvement or evidence-based practice projects
- Performance Improvement Plan (Check in Conversation and Reflection)
- Synchronous Discussion: Evidence-Based Practice in Public Health

N2PH

Session 7: Maternal, Child, & Family Health

The content areas covered in Session 7 include:

- Provide timely, statewide, and locally relevant and accurate information to the health care system and community on emerging and on-going maternal child health trends.
- Identify local maternal and child health community partners and their capacities; using life course expertise and an understanding of health disparities, develop a prioritized prevention plan; and seek funding for high priority initiatives.
- Identify, disseminate, and promote emerging and evidence-based information about early interventions in the prenatal and early childhood period that promote lifelong health and positive social-emotional development.
- Assure newborn screening as mandated by a state or local governing body including wraparound services, reporting back, following up, and service engagement activities.
- Coordinate and integrate categorically funded maternal, child, and family health programs and services.

Activity

- State of Maternal, Child, Family Health
    - Scavenger Hunt
- Trauma Informed Care
    - CDC Aces Course
    - Case Study
- The Life Course
    - Readings and resources
    - Unnatural Causes episode
- Reproductive Justice
- Maternal Child Health Assurance
    - References and readings
    - Safe Kids Worldwide
- Childhood Vaccinations
    - Online Training: CDC You Call the Shots
    - Resources
    - Vaccine hesitancy and conspiracy theories
- WIC
    - Readings, videos and resources
- Synchronous Discussion: Vaccine Hesitancy and Conspiracy Theories

N2PH

Session 8: Access to and Linkage with Clinical Care

The content areas covered in Session 8 include:

- Provide timely, statewide, and locally relevant and accurate information to the health care system and community on access and linkage to clinical care (including behavioral health), healthcare system access, quality, and cost.
- In concert with national and statewide groups and local providers of health care, identify healthcare partners and competencies, develop prioritized plans for increasing access to health homes and quality health care, and seek funding for high priority policy initiatives.
- Coordinate and integrate categorically-funded clinical health care.
- Ability to convene across governmental agencies, such as departments of transportation, aging, substance abuse/mental health, education, planning and development, or others, to promote health, prevent disease, and protect residents of the health department's geopolitical jurisdiction.

Activity

- Health Care Coverage and Access to Care
    - Readings, resources, and videos
    - Scavenger hunt
- Rural Health
    - Readings, videos, and resources
- Substance Abuse and Mental Health
    - Recorder webinars
    - Resources and readings
- Oral Health
- Transportation
- Aging
- American Indian/ Alaska Native Health
- Synchronous Discussion: Access to And Linkage with Care Case Studies

N2PH

Session 9: Emergency Preparedness

The content areas covered in Session 9 include:

- Ability and capacity to develop, exercise, and maintain preparedness and response strategies and plans, in accordance with established guidelines, to address natural or other disasters and emergencies, including special protection of vulnerable populations.
- Ability and capacity to lead the Emergency Support Function 8 – Public Health & Medical for the county, region, jurisdiction, and state.
- Ability to activate the emergency response personnel and communications systems in the event of a public health crisis; coordinate with federal, state, and local emergency managers and other first responders; and operate within, and as necessary lead, the incident management system.
- Ability to maintain and execute a continuity of operations plan that includes a plan to access financial resources to execute an emergency and recovery response.
- Ability to establish and promote basic, ongoing community readiness, resilience, and preparedness by enabling the public to take necessary action before, during, or after a disaster.
- Ability to issue and enforce emergency health orders.
- Ability to be notified of and respond to events on a 24/7 basis.
- Ability to function as a Laboratory Response Network (LRN) Reference laboratory for biological agents and as an LRN chemical laboratory at a level designated by CDC.

Activity

- Preparedness 101
- Incident Command System
  - FEMA Online Training
  - Interactive Game
- National Incident Management System
  - FEMA Online Training
- Local, State, And Federal Grants
- Preparedness Laws
- Public Health Response (Mass Care)
  - Case study
- Laboratory Response Network
- Communication Strategies
- Community Readiness and Resiliency
- Synchronous Discussion: Tabletop Exercise

N2PH

Session 10: Leadership and Policy Development

The content areas covered in Session 10 include:

- Ability to lead internal and external stakeholders to consensus, with movement to action, and to serve as the public face of governmental public health in the department's jurisdiction.
- Ability to directly engage in health policy development, discussion, and adoption with local, state, and national policymakers, and to define a strategic direction of public health initiatives.
- Ability to engage with the appropriate governing entity about the department's public health legal authorities and what new laws and policies might be needed.
- Ability to serve as a primary and expert resource for establishing, maintaining, and developing basic public health policy recommendations that are evidence-based, grounded in law, and legally defendable. This ability includes researching, analyzing, costing out, and articulating the impact of such policies and rules where appropriate, as well as the ability to organize support for these policies and rules and place them before an entity with the legal authority to adopt them.
- Ability to effectively inform and influence polices being considered by other governmental and non-governmental agencies within your jurisdiction that can improve the physical, environmental, social, and economic conditions affecting health but are beyond the immediate scope or authority of the governmental public health department.

Activity

- Leadership and Policy Development 101
- Public Health Policy Cycle
- Principles of Leadership
- Organizational Leadership
- Leadership Communication
- Leadership and Assurance
- Professional Organizations
- CPH Exam
- Synchronous Discussion: Leadership Ladder

N2PH

Session 11: Communication and Community Partnership Development

The content areas covered in Session 11 include:

- Ability to maintain ongoing relations with local and statewide media including the ability to write a press release, conduct a press conference, and use electronic communication tools to interact with the media.
- Ability to write and implement a routine communication plan that articulates the health department's mission, value, role, and responsibilities in its community, and support department and community leadership in communicating these messages.
- Ability to develop and implement a risk communication strategy, in accordance with Public Health Accreditation Board Standards, to increase visibility of a specific public health issue and communicate risk. This includes the ability to provide information on health risks and associated behaviors.
- Ability to transmit and receive routine communications to and from the public in an appropriate, timely, and accurate manner, on a 24/7 basis.
- Ability to develop and implement a proactive health education/health prevention strategy (distinct from other risk communications) that disseminates timely and accurate information to the public in culturally and linguistically appropriate (i.e., 508 compliant) formats for the various communities served, including through the use of electronic communication tools.
- Ability to create, convene, and sustain strategic, non-program specific relationships with key health-related organizations; community groups or organizations representing populations experiencing health disparities or inequities; private businesses and health care organizations; and relevant federal, tribal, state, and local government agencies and nonelected officials.
- Ability to create, convene, and support strategic partnerships.
- Ability to maintain trust with and engage community residents at the grassroots level.
- Ability to strategically select and articulate governmental public health roles in programmatic and policy activities and coordinate with these partners.

Activity

- Public Health 3.0
- Health Education
- Public Health Framing
- Media Advocacy
- Risk Communication Strategy
- Health Education
- Partnership Development
- Community Coalitions
- Local Policy Development
- Synchronous Discussion: Presentations of Evidence-Based Practice Projects

N2PH

Session 12: Presentation of Evidence-Based Practice Projects

The content areas covered in Session 12 include:

- Ability to collect sufficient foundational data to develop and maintain electronic information systems to guide public health planning and decision making at the state and local level. Foundational data include Behavioral Risk Factor Surveillance Survey (BRFSS), a youth survey (such as YRBS), and vital records, including the personnel and software and hardware development that enable the collection of foundational data.
- Ability to access, analyze, and use data from (at least) seven specific information sources, including (1) U.S. Census data, (2) vital statistics, (3) notifiable conditions data, (4) certain health care clinical and administrative data sets including available hospital discharge, insurance claims data, and Electronic Health Records (EHRs), (5) BRFSS, (6) nontraditional community and environmental health indicators, such as housing, transportation, walkability/green space, agriculture, labor, and education, and (7) local and state chart of accounts.
- Ability to conduct a community and statewide health assessment and identify health priorities arising from that assessment, including analysis of health disparities.

Activity

- Using Data in Practice
- Assessments:
  - Tier 1 Competency Assessment
  - Casey- Fink Retention Assessment
- Synchronous Discussion: Presentations of Evidence-Based Practice Projects

N2PH