



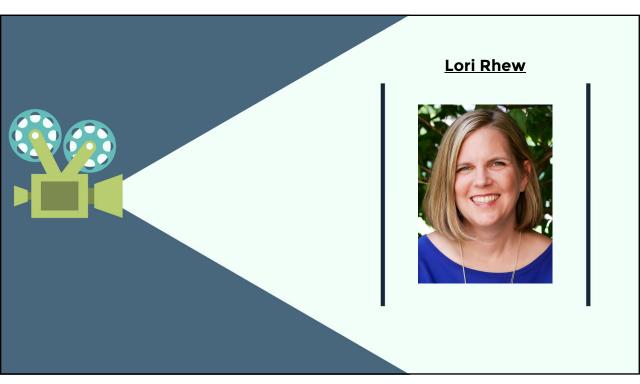
Amy Belflower Thomas

Output

Description:

Amy Belflower Thomas

























Deborah McGee















DRIVING
THE FUTURE

ASSESSMENT OF THE NORTH
CAROLINA LOCAL PUBLIC
HEALTH WORKFORCE

2021

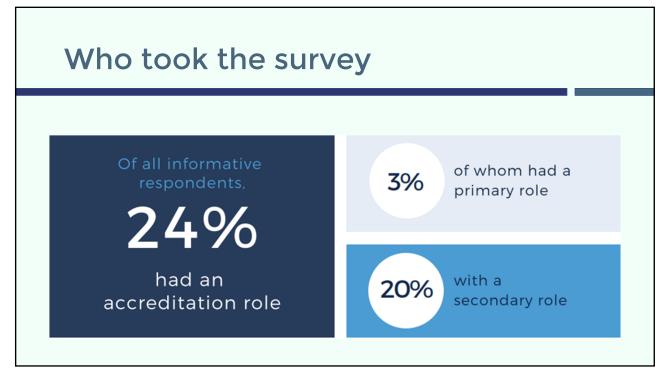
ACCREDITATION
SUPPLEMENT

27

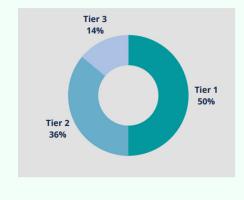
Introduction

- Goal to examine the education, skills, employment, and training needs of public health accreditation staff in NC
- Survey distributed to staff at all NC local health departments in February – March 2019
- Examined the responses of 424 survey participants who hold an accreditation role
- Represented accreditation staff employed by 69 of the 84 local health departments

29

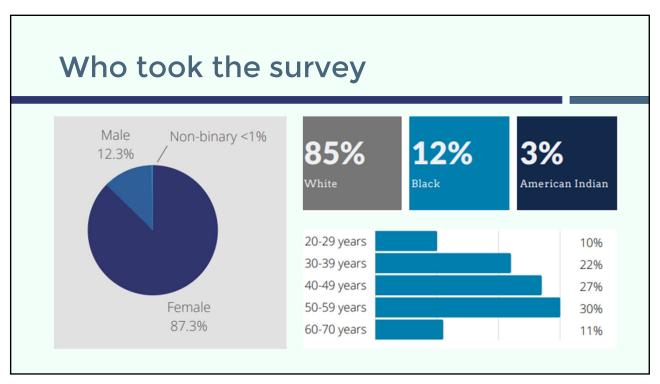


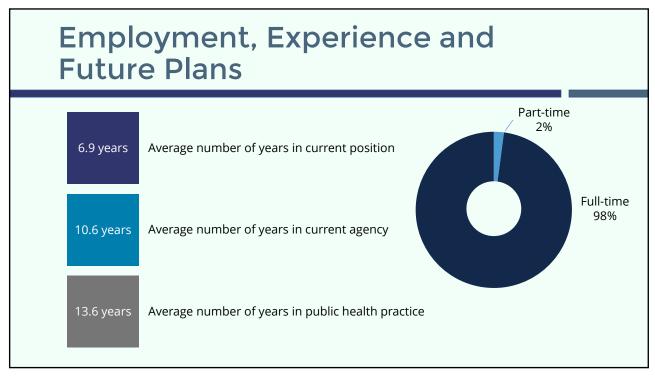
Who took the survey

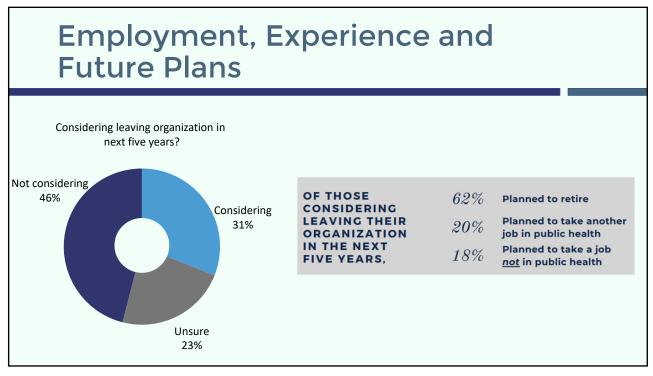


- Tier 1 = non-supervisor staff
- Tier 2 = supervisory or managerial staff
- Tier 3 = senior staff
- The distribution of Tier levels was similar for people in primary accreditation roles versus secondary accreditation roles

31

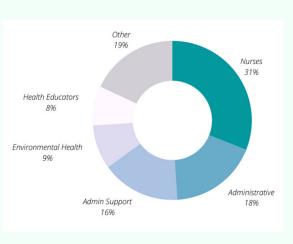






Roles, Education and Occupation





35

Ranking Skills

How important are these items in your day-to-day work?

How important do you think these skills will be for your day-to-day work in the next 5 years?

What is your current skill level for these items?

Strategic Skills Domains

Systems thinking

Change management

Persuasive communication

Data analytics

Problem solving

Diversity and inclusion

Resource management

Policy engagement

Skills were adapted from <u>Building Skills for a More Strategic Public Health Workforce: A Call to Action</u>

37

Strategic Skills Domains

HIGHEST SKILL GAP (HIGH IMPORTANCE + LOW SKILL)					
RANK	TIER 1	TIER 2	TIER 3*	ALL ACCREDITATION	
1	Change Management	Resource Management	Data Analytics	Change Management	
2	Data Analytics	Change Management	Resource Management	Resource Management	
3	Resource Management	Diversity & Inclusion	Policy Engagement	Data Analytics	

*Tier 3 should be interpreted with caution because of small sample size

Individual Strategic Skills

TOP 10 SKILL GAPS ACROSS ALL STRATEGIC DOMAINSACCREDITATION STAFF				
Accred. Rank Knowledge, Skill or Attribute Rank Overall		Knowledge, Skill or Attribute	Strategic Domain	
1	2	Familiarity with and use of problem-solving models such as design thinking	PROBLEM SOLVING	
2	1	Use economic evaluation methods to identify, measure and value costs, quality, and outcomes of public health interventions and programs	CHANGE MANAGEMENT	
3	28	Explore alternative financing models (e.g., social impact bonds, payfor-performance models)	SYSTEMS THINKING	
4	27	Assess potential impact of Medicaid reform within NC on agency programs, budgets and staffing	RESOURCE MANAGEMENT	
5	23	Identify funders, including unconventional partners, whose missions match with those of your agency/partners	SYSTEMS THINKING	

39

Individual Strategic Skills

Accred. Rank Rank Overall		Knowledge, Skill or Attribute	Strategic Domain	
6	12	Engage marginalized and under-resourced communities in decision-making	DIVERSITY AND INCLUSION	
7	39	Create and establish data use agreements with other agencies	DATA ANALYTICS	
8	43	Identify and use non-traditional data sources beyond public health including consumer data, social media and data from other sectors	DATA ANALYTICS	
9	19	Set metrics to benchmark and track progress, including outcome and quality measures	DATA ANALYTICS	
10	9	Identify gaps in data	DATA ANALYTICS	

Cross-Cutting Skills

TOP 5 SKILLS GAPS - CROSS-CUTTING SKILLS		
ACCREDITATION RANK	RANK OVERALL	CROSS-CUTTING SKILL
1	1	Knowledge and awareness of changes in North Carolina Medicaid policies
2	2	Engaging clients under NC Medicaid transformation
3	8	Developing/implementing successful strategic plans
4	n	Developing and implementing evaluation strategies
5	3	Knowledge and awareness of NC Local Health Department Accreditation program

41

Leadership Skills Show compassion for Operate within and contribute Provide recognition to others Effectively lead and support community members, staff and to a high-functioning team for work well done others in their work partners Possess an in depth Model a hopeful attitude within understanding of one's own the agency and across the community for improved Build trust with staff, partners Approach workplace challenges strengths in the workplace and and stakeholders from an adaptable perspective how these can contribute population health towards agency goals Model for others how to lead in Contribute towards and a way that promotes common communicate a vision that goals, garners support and resonates with others motivates others to act

Public Health 3.0

The majority of respondents were unaware or somewhat aware of Public Health 3.0 concepts

ACCREDITATION RANK	RANK OVERALL	PUBLIC HEALTH 3.0 SKILLS
1	2	Enhancing policies, rules and standards (e.g., accreditation) to foster Public Health 3.0 principles
2	5	Serving as the community leader in change initiatives (Chief Health Strategist)
3	4	Forming structured, cross-sector partnerships to foster shared funding, services, governance and collective action
4	8	Working with relevant partners to develop and implement initiatives that explicitly address upstream social determinants of health
5	3	Utilizing innovative funding models to support core infrastructure as well as community-level work to address the social determinants of health

43

Training Supports and Resources

MOTIVATION

- Personal growth/interest (79%)
- Staying current with new developments in their field (77%)
- Fulfilling an accreditation requirement (58%)

HEARING ABOUT OPPORTUNITIES

- NCDPH (63%)
- Supervisors (59%)
- Colleagues (45%)

49%

of accreditation respondents reported taking recent trainings from NCIPH in comparison with 38% of the overall workforce.

53%

of accreditation respondents had taken a local AHEC training,

25%

with the Public Health Nursing and Professional Development Unit* of NCDPH,

38%

with other branches/sections within NCDPH and

31% with NCPHA

TOP DELIVERY PREFERENCES

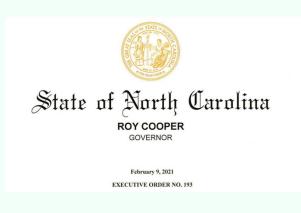
- Conferences (68%)
- Webinars and Webcasts (56%)
- Online courses (40%)
- 1-to-2 day intensive training sessions (37%)

BARRIERS

- Cost of trainings (59%)
- Difficulties taking time away from work (51%)
- Lack of adequate staffing to cover an absence (35%)

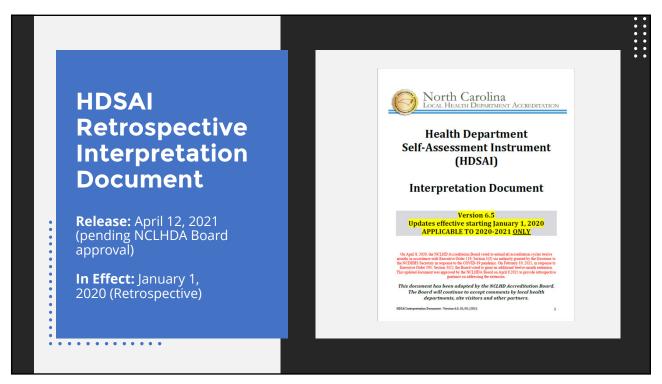


12 Month Accreditation Extension

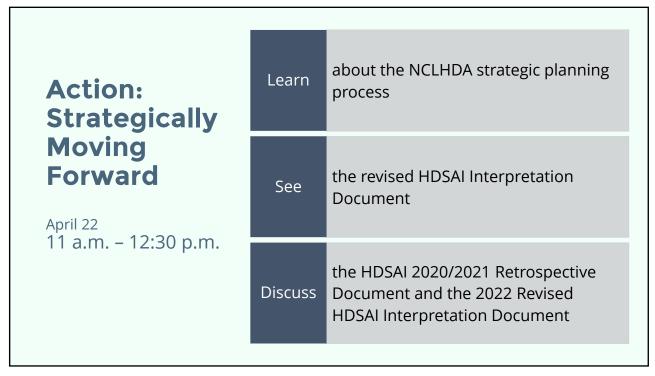


- a. The Secretary may subdelegate her authority to the Local Health Department Accreditation Board so that the Board may, upon finding that a waiver or modification of enforcement will provide necessary relief to local health departments responding to the COVID-19 pandemic and will not endanger public health, waive or modify enforcement of the accreditation scheduling requirements of 10A N.C. Admin. Code 48A .0205 and grant an additional extension of accreditation for a period of up to one year.
- b. The Secretary may subdelegate her authority to the Local Health Department Accreditation Board so that the Board may, upon finding that a waiver or modification of enforcement will provide necessary relief to local health departments responding to the COVID-19 pandemic and will not endanger public health, waive or modify enforcement of the community health assessment and State of the County's Health report requirements in 10A N.C. Admin. Code 48B .0201 that would otherwise be due during this State of Emergency or within sixty (60) days following the end of this State of Emergency.
- c. The authorities delegated by this Subsection are in addition to the authority delegated under Executive Order No. 139, Section 1(B), which are extended as set out in Section 1 of this Executive Order.

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Thank you

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The North Carolina Local Health Department Accreditation Program is part of the North Carolina Institute for Public Health at the Gillings School of Global Public Health at the University of North Carolina at Chapel Hill.

