

Academic Health Department Workgroup Meeting

May 8, 2012

SUMMARY

AHD Workgroup Accomplishments

- The <u>Academic Health Department (AHD) Workgroup</u> was formed to help develop the <u>AHD Learning Community</u> and has been successful in doing so. Based on Learning Community member input, a decision was made to dissolve the Workgroup following this final meeting.
- The AHD Workgroup accomplished a great deal since its first meeting in January 2011. The AHD Learning Community was launched, has held four meetings, and engages 110 members representing 32 states, DC, and six national organizations. Learning Community members have diverse backgrounds and work in a variety of areas within governmental public health, academia, nonprofit organizations, and primary care.
- Resources related to AHDs, such as a <u>concept paper</u>, <u>discussion paper</u>, <u>bibliography</u>, and <u>collection of partnership agreements</u>, have been developed and made available online.
- Discussions on AHD topics are occurring during AHD Learning Community meetings, as well as through email, the PHF Pulse blog, and news articles.
- > AHD Learning Community Profiles have helped connect members seeking assistance.
- Council on Linkages Between Academia and Public Health Practice (Council on Linkages) member organizations are sharing information about AHDs and the AHD Learning Community, and the Association of State and Territorial Health Officials and the National Association of County and City Health Officials (NACCHO) have been asked to consider gathering data about AHDs through their Profiles studies.
- The Council on Linkages is grateful for the efforts of all AHD Workgroup members in helping to make the AHD Learning Community a reality.

Future Opportunities for the AHD Learning Community

A number of opportunities for moving ahead with the AHD Learning Community were discussed and suggestions offered for how to pursue these opportunities.

Engaging Members with Varying Levels of Experience

- AHD Learning Community members have widely differing levels of experience with AHDs, from those who are just starting to consider the idea to those who have been working in AHDs for years. This strengthens the Learning Community, but it can be challenging to design meetings and other activities that are relevant and interesting to all members.
- Suggestions for engaging members included:
 - Asking experienced members to share their projects and accomplishments
 - Creating a group on LinkedIn for guestions and discussion
 - Holding an "office hour" session during meetings when experienced members are available to answer questions
 - Developing a mentoring/coaching program to match up members with expertise and those who have questions
 - Having roundtable discussions or other forms of conversation during the in-person meeting at the American Public Health Association (APHA) Annual Meeting
 - Hosting a social event during the APHA Annual Meeting and inviting AHD partners
 - Holding a meeting during the NACCHO Annual
 - Regularly engaging the leadership of national organizations through conference calls or other means

Expanding to Include Primary Care

- The AHD Learning Community is starting to explore connecting with primary care providers. The Learning Community has been introduced to the directors of the Health Resources and Services Administration's State Primary Care Offices, and the National Association of Community Health Centers will be contacted.
- A discussion of ways in which health departments, academic institutions, and primary care organizations may work together covered:
 - o Public health leadership institutes
 - Community health training programs connected with local health departments and federally qualified health centers (FQHCs)
 - o Community-based research projects
 - Interviewing and selecting health sciences interns for health departments and community health centers
 - Indigent care programs
 - Primary care residency programs
- Suggestions of where to look for linkages between AHDs and primary care included:
 - o Dual degree programs, such as MD/MPH or MSN/MPH degrees
 - Rural health programs that connect to FQHCs
 - o Preventive medicine or infectious disease programs
 - Active state and federal organizations for primary care
 - Area health education centers
- Highlighting a few examples of AHDs working with primary care organizations on a conference call could help identify additional examples.

Connecting with the Public Health Practice-Based Research Networks

- The <u>Public Health Practice-Based Research Networks</u> (PBRNs) share similarities with AHDs in that they join academic and practice organizations, and several AHD Learning Community members are involved in PBRNs.
- The PBRNs were introduced to AHDs and the AHD Learning Community during the recent Keeneland Conference.
- There may be an opportunity for the AHD Learning Community to encourage and help facilitate the development of formal agreements between the health departments and academic institutions in PBRNs through offering examples of and guidance on agreements.
- The AHD Learning Community is working to connect with the National Coordinating Center for the Public Health PBRN Program and encourage PBRN members to become involved in the Learning Community.

Next Learning Community Meeting

The next AHD Learning Community meeting will be held in June or July. Suggestions for agenda topics may be sent to Kathleen at kamos@phf.org.

Additional Opportunities for Input

- Although this was the last formal AHD Workgroup meeting, members are encouraged to stay engaged in the AHD Learning Community and provide input on its direction and activities. Staff may also reach out to Workgroup members individually or in small groups for assistance.
- Suggestions for strengthening the AHD Learning Community or highlighting AHDs can be sent to Kathleen at kamos@phf.org.
- Thank you to all AHD Workgroup members for your efforts to develop a national AHD Learning Community!