

Council on Linkages Between Academia and Public Health Practice Conference Call Meeting

Date: April 11, 2017

Meeting Minutes – Draft

Members Present: C. William Keck (Chair), Wendy Braund, Christina Dokter, Michael Fagen, Gary Gilmore, Rebecca Gold, Lynn Goldman, Barbara Gottlieb, Patrick Lenihan, Susan Little, Laura Rasar King, Susan Swider

Other Participants Present: Mike Barry, Alan Bergen, Rosemary Chaudry, Courtney Dezendorf, Ashley Edmiston, Steve Godin, Elizabeth Harper, Tanya Honderick, Barbara Ann Hughes, Emmanuel Jadhav, Gail Jones, Kirk Koyama, Rick Kurz, Martha Kutchen, Veronica Mahathre, Bryn Manzella, Kate McFadyen, Ashley Minkeu, Paulani Mui, Candace Nelson, Eva Perlman, Janet Place, Julia Resnick, Rachael Roan, Elizabeth Rumbel, Lenee Simon, Veena Viswanathan, Sarah Weiner, Carrie Ziegler

Staff Present: Ron Bialek, Kathleen Amos, Janelle Nichols

Agenda Item	Discussion	Action
Welcome, Overview of Agenda, and Introduction of New Representatives	The meeting began with a welcome by Council Chair C. William Keck, MD, MPH. Roll call was conducted.	
> Penrose Jackson	Dr. Keck reviewed the agenda for the meeting.	
(ACHI) > Wendy Braund (ASTHO) > Michael Fagen (SOPHE)	Dr. Keck welcomed and introduced three new Council representatives: Penrose Jackson for the Association for Community Health Improvement (ACHI), Wendy Braund, MD, MPH, MSEd, FACPM, for the Association of State and Territorial Health Officials (ASTHO) and Michael Fagen, PhD, MPH, for the Society for Public Health Education (SOPHE).	
Approval of Minutes from August 15, 2016 Meeting Action Item: Vote on approval of minutes	Dr. Keck asked for any changes to the minutes of the August 15, 2016 Council meeting. Gary Gilmore, MPH, PhD, MCHES, moved to approve the minutes as written. Barbara Ann Hughes, MPH, seconded the motion. No additions or corrections.	Minutes of the August 15, 2016 Council meeting were approved as written.
Council Membership Vote – CEPH Action Item: Vote on membership status	The Council on Education for Public Health (CEPH) has fulfilled the required preliminary membership period for the Council. Dr. Keck asked for discussion on granting formal membership status to CEPH. Lynn Goldman, MD, MS, MPH, moved to grant formal membership status to CEPH. Dr. Gilmore seconded the motion.	CEPH was granted formal Council membership.
Operationalizing Council Strategic Directions, 2016-2020	Dr. Keck provided an overview of how the Council's Strategic Directions are implemented and can be used by Council member organizations. The Council's Strategic Directions provide the structure within which	

Council activities are pursued. The Council adopted Strategic Directions for 2016-2020 in August 2016 following a nearly yearlong development process designed to ensure that Council member organizations had input into the Strategic Directions and that the Council's work continues to meet ongoing and emerging needs within the public health community. Although the Council does not currently have active projects in all areas of the Strategic Directions, the Strategic Directions set the scope of the Council's work based on areas that the Council has collectively determined are important to pursue and is key as activities are prioritized and funding is sought.

The Strategic Directions serve important roles for both Council staff and Council member organizations. For Council staff, the Strategic Directions offer a high-level guide of what the Council aims to accomplish and help in prioritizing where their support for Council activities is focused, in organizing Council meetings, and in seeking funding to advance Council work. For Council member organizations, the Strategic Directions articulate areas that the Council is interested in and provide a framework for the types of topics member organizations may wish to raise with the Council. Council member organizations are encouraged to use the Strategic Directions to suggest ideas for Council projects, request input from the Council to inform their own activities, and support their proposals for funding. Council member organizations are welcome to explore the Strategic Directions for activities that align with their own priorities, bring these topics to the Council for discussion and action, and use the Strategic Directions to help make the case to funders of the importance of investing in those activities. Every Council member organization has a role to play in achieving the goals of the Strategic Directions, and collective effort is essential for progress to be made. The impact of the Council is defined not only by the impact of initiatives of the Council as a whole, but also by the impact Council member organizations contribute individually through activities aligned with the Strategic Directions. Council member organizations are encouraged to adopt key concepts within the Strategic Directions, take ownership of specific strategies and tactics that resonate with their aims, and strengthen the overall impact of the Council by contributing to progress in these areas. Working together and

	aligning activities helps to magnify efforts and achieve more significant impact.	
	This year is the 25th anniversary of the Council, and throughout the year, Council leadership and staff will be looking for opportunities to highlight individual member organizations' contributions toward the Strategic Directions and share Council successes and achievements. Council members will be invited to share how their organizations' activities align with the Council's Strategic Directions and are encouraged to discuss the Strategic Directions with their organizational leadership, review their organization's strategic plans, and share what their organization is working on that complements, supports, or reinforces what the Council has identified as priorities. Dr. Keck invited discussion on operationalizing the Strategic Directions.	Council staff will follow-up with members about opportunities to share how their organizations' activities align with the Council's Strategic Directions
Core Competencies for Public Health Professionals	Dr. Keck provided an update on activities related to the Core Competencies for Public Health Professionals (Core Competencies).	
Update on Usage of the Core Competencies	The Core Competencies and related resources and tools continue to be used within health departments, academic institutions, and other	
Core Competencies Review Cycle	public health organizations, and the National Association of County and City Health Officials (NACCHO) released updated data on use	
 Competencies for Population Health and Performance Improvement Professionals 	within local health departments in the 2016 National Profile of Local Health Departments. Among other statistics, this study reports a 73% increase in use of the Core Competencies by local health departments since the study was last completed in 2013 – with usage growing from 26% to 45%.	
	Use of the Core Competencies is highlighted by the frequency with which this and related resources and tools are accessed through the Council website. Since the June 2014 release of the current version, the Core Competencies have been accessed more than 121,000 times and related resources and tools have been accessed more than 232,000 times. The most accessed resources and tools continue to be competency self-assessments, collections of job descriptions and workforce development plans that incorporate the Core Competencies, and the collection of other examples illustrating how the Core Competencies are used.	
	The Core Competencies Workgroup continues to focus on developing and enhancing resources and tools to support this use, including developing a new tool for helping to	Examples of job descriptions and workforce development plans that incorporate the

determine essential Core Competencies for job descriptions, which is anticipated to be available later this spring, and adding new examples of job descriptions and workforce development plans to these collections.

The Council has a long-standing commitment to the public health community to ensure that the Core Competencies remain current and continue to reflect the reality of working in public health, and one way that this is accomplished is by considering every three years whether there is a need to revise the Core Competencies. With the three year anniversary of the current version of the Core Competencies in June, the Council discussed whether significant enough changes had occurred in the public health field to necessitate potential revision of the Core Competencies. The Council decided not to review the Core Competencies for potential revision at this time.

Kathleen Amos, MLIS, shared that the Public Health Foundation (PHF) has recently begun working on a project related to legal epidemiology competencies. The Centers for Disease Control and Prevention's Public Health Law Program is developing a Legal Epidemiology Competency Model (LECM) to support public health practitioners, lawyers, and policy experts working in this area. PHF is hosting a virtual town hall meeting on May 11, 2017 to gather feedback on the draft LECM.

The Core Competencies can be a foundation for discipline-specific or other specialized competency sets. Two such examples are the Priority Competencies for Population Health Professionals being developed by PHF and ACHI and the Competencies for Performance Improvement Professionals in Public Health being developed by PHF.

The Priority Competencies for Population Health Professionals describe desired skills for population health professionals and are primarily designed for non-clinical hospital, health system, public health, and healthcare professionals engaged in assessment of population health needs and development, delivery, and improvement of population health programs, services, and practices. Development of these competencies began in early 2015, and the draft competencies are currently open for public comment. Feedback received will help to refine the competency set.

Core Competencies, other examples of Core
Competencies use, and expressions of interest in the Core Competencies
Workgroup can be sent to Janelle Nichols at inichols @phf.org

Council staff will include information about the legal epidemiology competencies virtual town hall meeting in the Council meeting summary.

Feedback on the Priority Competencies for Population Health Professionals can be sent to Kathleen Amos at kamos@phf.org. The Competencies for Performance Improvement Professionals in Public Health aim to offer additional guidance in performance improvement for individuals with responsibilities for accreditation, quality improvement, performance management, or community improvement in public health. A subgroup of the Core Competencies Workgroup was recently formed to support the refinement of these competencies.

Expressions of interest in joining the Performance Improvement Competencies Subgroup may be sent to Julie Sharp at jsharp@phf.org.

With the Core Competencies serving as a backbone for competency development efforts, a question has been raised of whether the Council should become involved in recognizing competency sets that are based on the Core Competencies and, if so, whether there are particular guidelines or criteria a set of competencies must meet before receiving Council recognition. Dr. Keck invited discussion about the idea of Council involvement in recognizing competency sets based on the Core Competencies. Dr. Gilmore made a motion to explore this idea. Christina Dokter, MA, PhD, seconded the motion.

The Core Competencies Workgroup will explore Council involvement in recognizing competency sets based on the Core Competencies and report back to the Council.

Update on Academic Health Department Learning Community

Dr. Keck provided an update on activities of the Academic Health Department (AHD) Learning Community.

The AHD Learning Community currently has approximately 700 members. Virtual Learning Community meetings are now held bimonthly, with meetings in December 2016 and March 2017 highlighting the Academic Health Collaborative of Worcester (MA) and New River AHD (VA), respectively. Meetings in May and July 2017 will focus on AHD partnerships in IL and TN, respectively. Additional meetings are being planned for later this year.

The AHD Research Agenda was developed to support and encourage collaborative research on the structure, functions, and impacts of AHD partnerships. After incorporation of feedback received during and following the August 2016 Council meeting, the Council voted to approve the research agenda, and it was released in October 2016. This research agenda offers more than 60 potential research questions focused on the AHD model. A commentary describing the development of the research agenda has been accepted for publication in the *American Journal of Public Health*.

The AHD Learning Community has recently launched an *Ask the AHD Expert* column featuring questions from Learning Community members and providing guidance related to

Contributions for any AHD Learning Community resources are always welcome and can be sent

	AHD partnerships. Published on the PHF Pulse blog, the first column in this series was released in March 2017, and columns are anticipated to be published quarterly. Planned future activities also include drafting a staged model of AHD development to help illustrate the variety of structures that AHD partnerships can have, and documenting and sharing stories of successful AHD partnerships. A session focused on these activities will be presented at the 2017 NACCHO Annual Meeting. The AHD Mentorship Program also continues to grow, with 13 mentor/mentee pairs working together, and additional matches being created. Dr. Keck invited questions about the AHD Learning Community.	to Kathleen Amos at kamos@phf.org. Expressions of interest in participating in the AHD Mentorship Program as either a mentor or mentee may be sent to Janelle Nichols at inichols@phf.org.
ASTHO: Public Health Workforce Interests and Needs Survey	ASTHO's Council representative, Dr. Braund, and Elizabeth Harper, DrPH, Director of Workforce Research, ASTHO, discussed the Public Health Workforce Interests and Needs Survey (PH WINS). PH WINS aligns well with the Council's Strategic Directions, is mentioned specifically in the Strategic Directions, and offers insights that can help inform the development of the public health workforce. PH WINS is a nationally representative survey of state health employees that gathered data from approximately 10,000 respondents in areas such as public health education, job satisfaction, job retention, and training needs based on skill items adapted from the Core Competencies. These data are available for further research through a data use agreement with ASTHO. Through funding from the de Beaumont Foundation, ASTHO is working on an implementation program in response to these findings and the second iteration of the survey, which is anticipated this fall. Dr. Keck invited questions for Dr. Braund and Dr. Harper.	
ACPM: State Licensure for Preventive Medicine Physicians	Mike Barry, CAE, Executive Director, American College of Preventive Medicine (ACPM), discussed state licensure for preventive medicine physicians. In this time of healthcare transformation, preventive medicine physicians can play a valuable role in creating a bridge between public health and healthcare, as the preventive medicine specialty has a dual focus on public health and healthcare and practices a population health approach to medical delivery. These skills are more in demand than ever in	ACPM will draft a consensus statement about the need for and role of preventive medicine physicians for Council consideration.

	the current environment, but preventive medicine physicians may face challenges getting licensed by state medical boards depending on how these boards define the active practice of medicine and direct clinical care. ACPM has been addressing this in a number of ways, including creating a task force, developing a position statement, providing materials, and responding to physicians experiencing licensing problems. ACPM sees this as a critical workforce and pipeline issue and asked the Council to consider developing a consensus statement on this issue. Dr. Keck invited questions for Mr. Barry.	
NPBHE: Certified in Public Health Exam	Rick Kurz, PhD, Chair, National Board of Public Health Examiners (NBPHE), discussed the Certified in Public Health (CPH) certification program and changes to the CPH exam. NBPHE has completed a job task analysis and will be revising the CPH exam based on the input gathered. Important tasks from the job task analysis have been classified into domains, and a comparison has been done with the domains in the Core Competencies and other national efforts. NBPHE is now working to develop the new CPH exam. NBPHE welcomes feedback that can lead to more alignment with other national efforts and developing common language. Dr. Keck invited questions for Dr. Kurz.	A follow-up webinar that will offer more detail about changes to the CPH certification program and CPH content outline will be scheduled. Information about this meeting will be sent to Council members by email.
Other Business and Next Steps	Dr. Keck asked if there was any other business to address. Throughout the year, Council staff will be asking for information about member organizations' activities and how they align with, support, or reinforce the Council's Strategic Directions, and will be looking for ways to share that information to highlight and celebrate the impact the Council and its member organizations are able to achieve by working collectively. The next Council meeting will be on Monday, July 17th from 1-3pm ET and is likely to be held by conference call. Additional meetings are scheduled for October 2nd and December 12th.	Council staff will follow-up with Council members for information about how their organizations' activities align with, support, or reinforce the Council's Strategic Directions, and will determine how to share this information. Any questions about Council meetings can be sent to Janelle Nichols at inichols@phf.org.