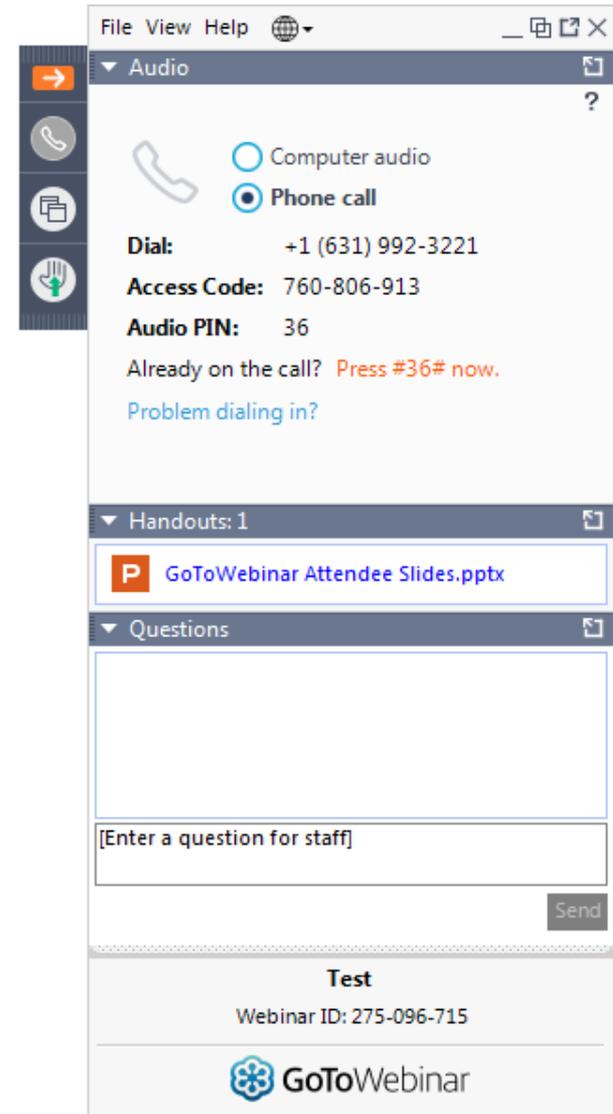


Council on Linkages Between Academia and Public Health Practice Meeting

December 12, 2017

Housekeeping Items

- Council members and designees are unmuted; all other attendees are muted. If you are using your phone, please choose the “Phone call” option and enter your Audio PIN (found in the “Audio” panel). If you are using a mic, please choose the “Computer audio” option.
- Please use the “Raise Hand” feature to indicate that you’d like to be unmuted.
- Meeting materials and slides are available in the “Handouts” section
- Feel free to use the “Questions” box to communicate with staff during the meeting.



Council on Linkages Between Academia and Public Health Practice

To improve the performance of individuals and organizations within public health by:

- Fostering, coordinating, and monitoring collaboration among the academic, public health practice, and healthcare communities
- Promoting public health education and training for health professionals throughout their careers
- Developing and advancing innovative strategies to build and strengthen public health infrastructure

Funded by
Centers for Disease Control and Prevention

Staffed by
Public Health Foundation

22 National Public Health Organizations:

- American Association of Colleges of Nursing
- American College of Preventive Medicine
- American Public Health Association
- Association for Community Health Improvement
- Association for Prevention Teaching and Research
- Association of Accredited Public Health Programs
- Association of Public Health Laboratories
- Association of Schools and Programs of Public Health
- Association of State and Territorial Health Officials
- Association of University Programs in Health Administration
- Centers for Disease Control and Prevention
- Community-Campus Partnerships for Health
- Council on Education for Public Health
- Health Resources and Services Administration
- National Association of County and City Health Officials
- National Association of Local Boards of Health
- National Environmental Health Association
- National Library of Medicine
- National Network of Public Health Institutes
- National Public Health Leadership Development Network
- Quad Council of Public Health Nursing Organizations
- Society for Public Health Education

Agenda

- Approval of Minutes from October 2, 2017 Meeting
 - **Action Item:** Vote on Approval of Minutes
- Request for Council Membership – Veterans Health Administration
 - **Action Item:** Vote on Membership Request
- CDC: Public Health Associate Program
- The Kresge Foundation: Emerging Leaders in Public Health Initiative
- Advocating for the Public Health Workforce: The Role of the Council
- Demonstrating Council Impact
- Council Member Request: New Approaches to Practice-based Research
- Performance Improvement and Population Health Competencies
- Core Competencies for Public Health Professionals
- Academic Health Department Learning Community
- Other Business and Next Steps

Approval of Minutes from October 2, 2017 Meeting

➤ **Action Item:** Vote on Approval of Minutes

Request for Council Membership – Veterans Health Administration

➤ **Action Item:** Vote on Membership Request

CDC: Public Health Associate Program

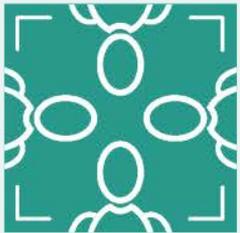
- Speaker: J.T. Theofilos, MBA, Team Lead, Partnerships and Stakeholder Engagement, Public Health Associate Program (PHAP)

The Kresge Foundation: Emerging Leaders in Public Health Initiative

- Speaker: Phyllis Meadows, PhD, Senior Fellow – Health, The Kresge Foundation



THE
KRESGE
FOUNDATION



EMERGING
LEADERS
IN PUBLIC
HEALTH

About the initiative

December 2017



\$5M Invested

Cohort I: 2015 - 2016

Cohort II: 2017 - 2019

Cohort III: Recruiting Soon!

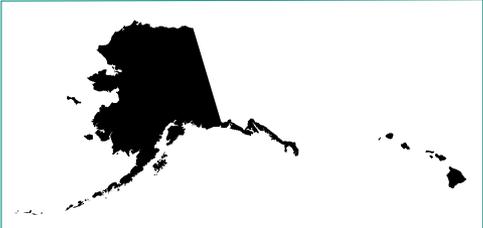
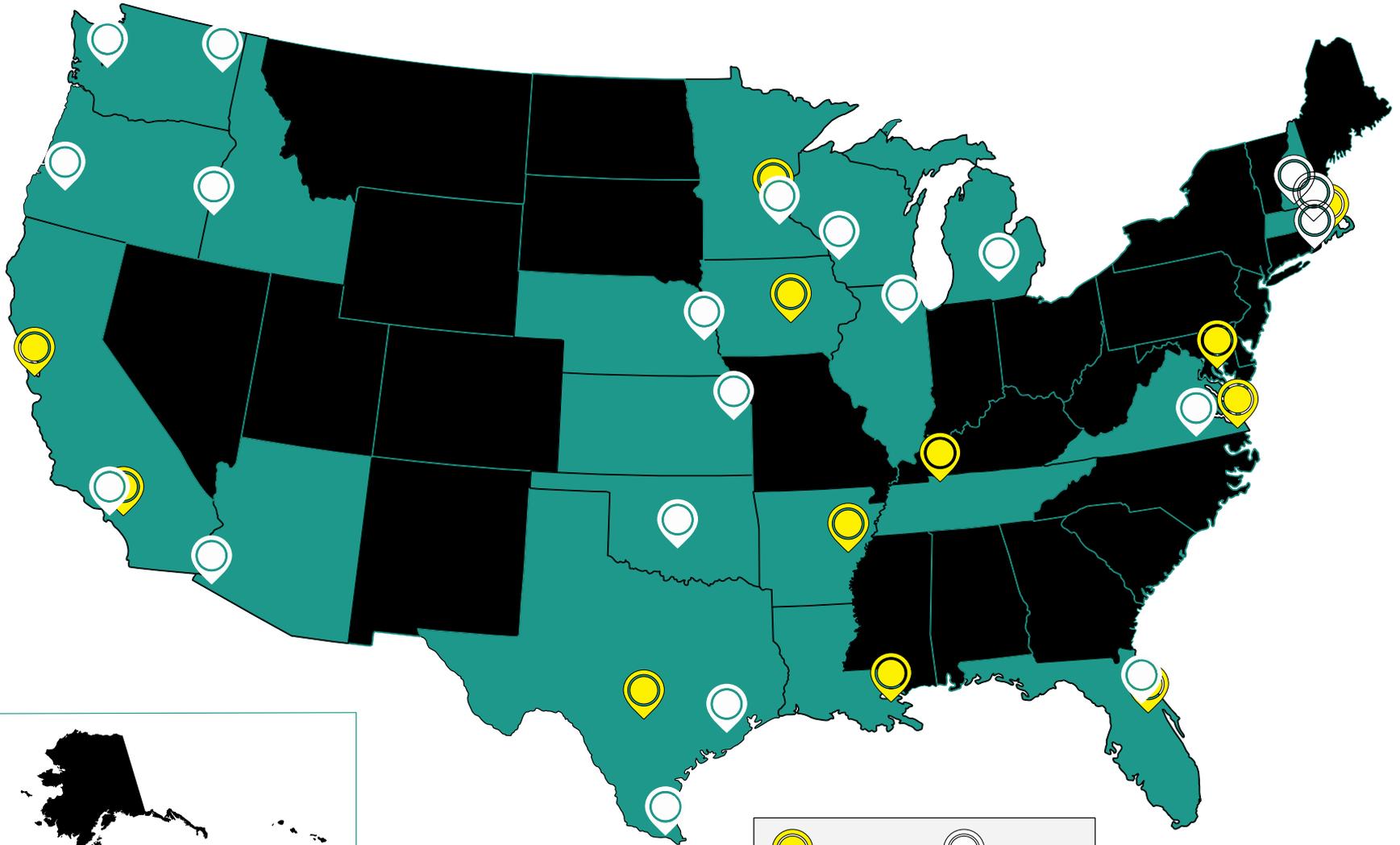
The initiative equips local public health officers with knowledge and skills to transform the role of public health in their community through an 18-month action-based learning program.



- Components
 - Leadership Development, Tailored Coaching
 - Peer support and action learning “virtual” meetings
 - Technical assistance
 - Resource connections
- Applied Learning Resource grants
- 18 months experience



Community of Leaders





Goals

- 100 leaders developed across the US
- Transformational blueprints for new roles in public health

Model

- Leader and co-leader from each location
- Leadership development, support and resources



- **The public health officer and an emerging leader develop a concept to transform the role of their local public health agency.**
- **Leaders gain skills and knowledge through shared learning with their cohort.**
- **Teams receive a \$125,000 grant to accelerate their growth through applied learning and develop new models of service for local public health agencies.**





At the Calvert County Health Department in Maryland, Laurence Polsky and Kirsten Forseth used their grant funds to establish the health department as a principal safety-net provider for adolescent behavioral health services in the school system.



- **Public health leaders gain business, finance and entrepreneurial skills to lead in today's dynamic health care environment.**

- **ELPH leaders engage community members in transforming the role of public health.**



- **Participants apply leadership skills through real-time organizational transformation.**



- Expect applications to open next year
- Sign up to receive updates at:
kresge.org/ELPH

TWO LEADERS – ONE CONCEPT

18 Months to Transformation

Emerging Leaders in Public Health
Cohort III Recruitment Begins Fall 2017
Want to learn more? Visit: kresge.org/ELPH

The Emerging Leaders in Public Health initiative equips local public health officers with knowledge and skills to transform the role of public health in their community.
Sign up to receive updates at kresge.org/ELPH

THE KRESGE FOUNDATION

EMERGING LEADERS
IN PUBLIC HEALTH

The graphic features a vibrant butterfly with orange, black, and white wings perched on a green leaf. The background is a soft-focus green. A vertical teal bar on the left contains the text 'TWO LEADERS – ONE CONCEPT'. The main text is in white and yellow, and the bottom section is on a light grey background.



Goal: 100 leaders demonstrating new roles for local public health

- kresge.org/ELPH
- National Program Office:
University of North Carolina at Chapel Hill



Advocating for the Public Health Workforce: The Role of the Council

- Speaker: Hugh Tilson, MD, DrPH, MPH, Adjunct Professor, University of North Carolina Gillings School of Global Public Health

An Impressive History

- Convening diverse national organizations to improve public health training, research, and practice for 25 years
- Developed consensus around core skills and competencies desirable for the practice and teaching of public health
- Put public health systems research on the map
- Influenced academic and practice accreditation criteria
- Developed evidence-based practice guidelines leading to creation of the U.S. Community Preventive Services Task Force
- Providing tools, resources, and technical assistance to institutions trying to establish academic health departments



American College of Preventive Medicine
physicians dedicated to prevention



Council on Linkages Between Academia and Public Health Practice

Core Competencies for Public Health Professionals

- Identified need to guide skill development of public health practitioners in all settings
- Advocated for and facilitated development of consensus involving practitioners, faculty, and researchers
- Widely used by health departments and academic institutions
- Moving beyond traditional public health agencies to hospitals and health systems



**COUNCIL ON LINKAGES
BETWEEN ACADEMIA AND
PUBLIC HEALTH PRACTICE**

*...bringing together public health education,
science, and practice*

**Core Competencies for
Public Health Professionals**

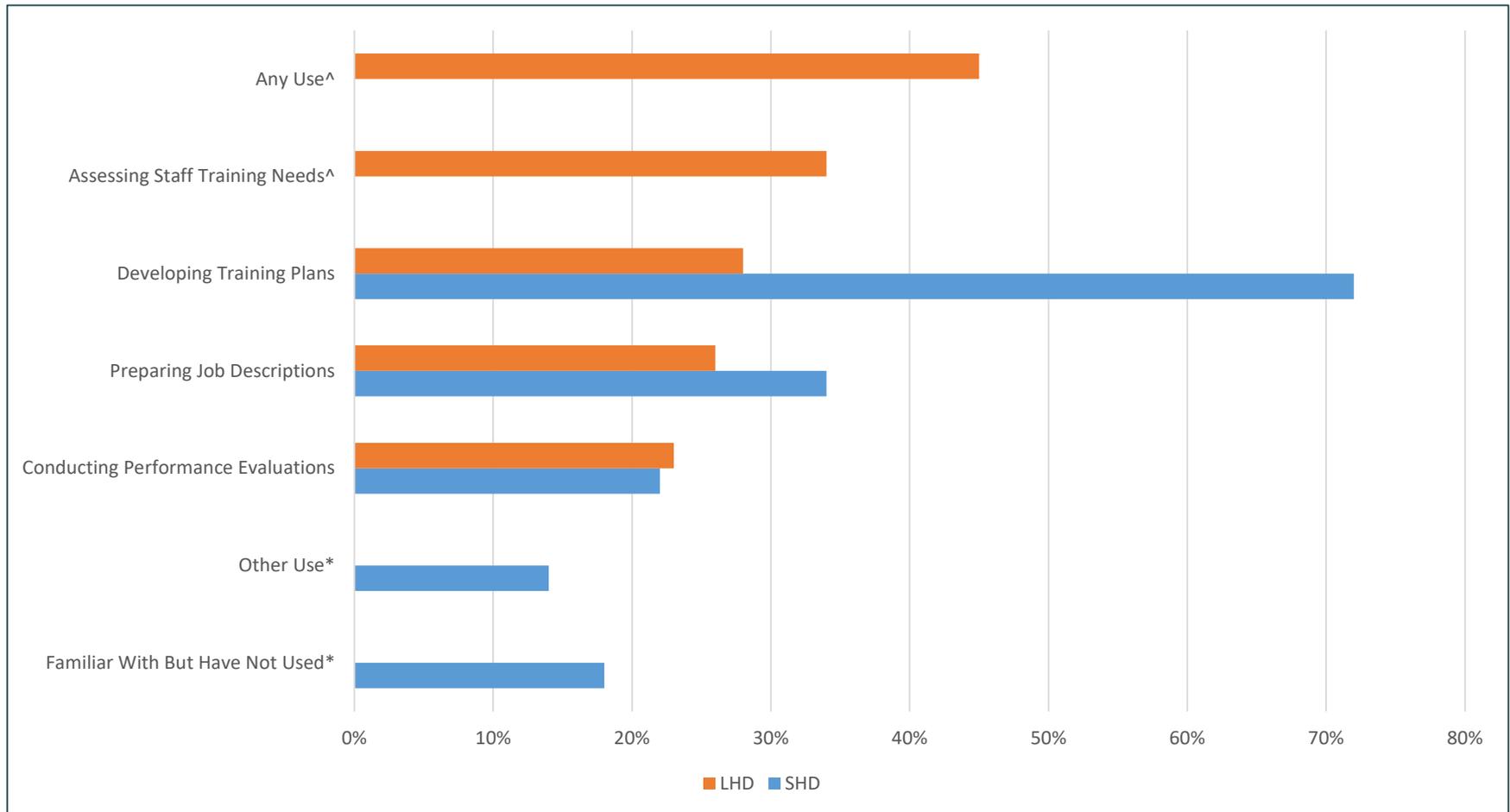
Adopted April 2001

Prologue Revised August 2005

A collaborative activity of:



Health Department Usage of the Core Competencies: Data from 2016 ASTHO and NACCHO Profiles



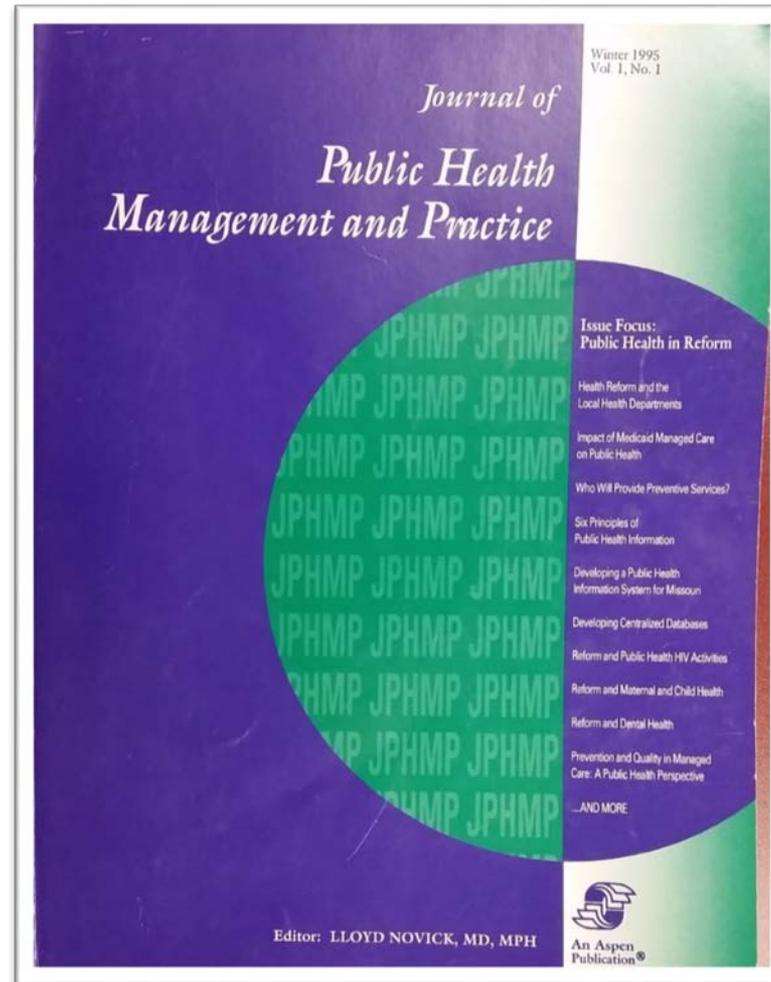
* Data not included in NACCHO Profile

^ Data not included in ASTHO Profile

Healthy People 2010 and 2020: Advocated for Use of Core Competencies

- PHI-1: Increase the proportion of Federal, Tribal, State, and local public health agencies that incorporate Core Competencies for Public Health Professionals into job descriptions and performance evaluations
- PHI-2: Increase the proportion of Tribal, State, and local public health personnel who receive continuing education consistent with the Core Competencies for Public Health Professionals
- PHI-3: Increase the proportion of Council on Education for Public Health (CEPH) accredited schools of public health, CEPH accredited academic programs, and schools of nursing (with a public health or community health component) that integrate Core Competencies for Public Health Professionals into curricula

A Place to Publish Public Health Practice Research



But, Where's the Research?!?!

- Let's create and advocate for public health systems research!!
- What better way to leverage the expertise of practitioners and researchers?
- What better way to guide the practice of public health and practice-based research?
- What better way to produce evidence for the practice of public health?

Don't We Need to Define What We're Talking About and Have a Research Agenda?



COUNCIL ON LINKAGES BETWEEN ACADEMIA AND PUBLIC HEALTH PRACTICE

Developing a National Public Health Practice Research Agenda

Monday November 8, 1999

2:15-3:45 pm

Hyatt Chicago – San Francisco Room



COUNCIL ON LINKAGES BETWEEN ACADEMIA AND PUBLIC HEALTH PRACTICE

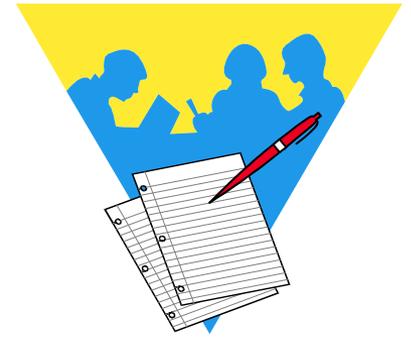
GETTING ON WITH IT:

Developing a National Public Health Practice Research Agenda

Presented by Hugh Tilson, MD, DrPH

November 15, 2000

Identifying What Exists



The Council on Linkages is collecting and analyzing current public health practice research activities being conducted at the 23 Prevention Research Centers (PRCs) affiliated with Schools of Public Health.

Relevant research from the Centers for Disease Control and Prevention (CDC) and National Institutes of Health (NIH) are being analyzed to ensure that the national public health practice research agenda builds on what exists and is under development.

End Products

- A coordinated and comprehensive national public health practice research agenda
- A “guide” to public health practice research priorities
- A framework for other public health practice research agenda-setting activities

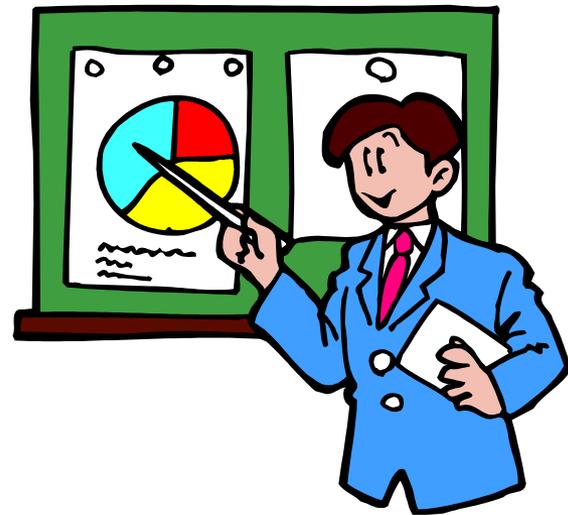




Table 1

**FRAMEWORK FOR
PUBLIC HEALTH PRACTICE RESEARCH AGENDA**

<p>□ Essential Public Health Services (Source: Public Health Functions Steering Committee)</p>	Healthy People 2010 Objectives Categories			
	Promote Health Behaviors	Promote Healthy and Safe Communities	Improve Systems for Personal and Public Health	Prevent and Reduce Disease and Disorders
	Chapters			
	Objectives (singular or grouped)			
1. Monitor health status to identify community health problems	<p>In each box....</p> <ul style="list-style-type: none"> ◆ What do we need to know to be effective — interventions, causes, methodological research? ◆ What do we know? ◆ Info being used? ◆ Need to better disseminate? ◆ Need to better translate? ◆ What do we not know? ◆ What specific questions need to be answered? ◆ What research is underway and when will it be completed? <p>Priority setting...</p> <ul style="list-style-type: none"> ◆ Take key dimensions of columns and rows ◆ How important to know to deliver EPHS? ◆ How doable? How easy to answer question? 			
2. Diagnose and investigate health problems and health hazards in the community				
3. Inform, educate, and empower people about health issues				
4. Mobilize community partnerships to identify and solve health problems				
5. Develop policies and plans that support individual and community health efforts				
6. Enforce laws and regulations that protect health and ensure safety				
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable				
8. Assure a competent public health and personal health care workforce				
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services				
10. Research for new insights and innovative solutions to health problems				

**Essential Public Health Services
(Source: Public Health Functions
Steering Committee)**

Healthy People 2010 Objectives Categories

7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable

8. Assure a competent public health and personal health care workforce

9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services

Excerpt from Letter to CDC Director, Dr. David Satcher July 25, 2000

Currently, the Council on Linkages has collected and analyzed public health practice research activities being conducted at the 23 Prevention Research Centers affiliated with Schools of Public Health. In addition, research agendas and activities from various federal agencies such as the Centers for Disease Control and Prevention (CDC), National Institutes of Health (NIH), and Agency for Healthcare Quality and Research (AHQR) have been reviewed to ensure that the national public health practice research agenda builds on what exists and is under development.

Throughout our research into each respective agency conducting public health research, several poignant facts have come to light. Some include:

- ◆ Most research activities and agendas lack connection to HP2010 objectives and the ten EPHS.
- ◆ Some agencies conduct little, if any, public health practice research. Biomedical research is a priority in those agencies.
- ◆ Allocation of federal research dollars are not consistent with the Healthy People 2010 objectives, making these goals more difficult to attain.
- ◆ The decentralized nature of public health research activities within and among federal agencies have made planning future research initiatives more difficult and tasking.

Public Health Systems Research - “Closed Door” Meeting – September 29, 2005

Definition of Public Health Systems Research (PHSR)

A field of inquiry using quantitative and qualitative methodology to examine the impact of the organization, staffing, financing, and management of public health systems on the access to, delivery, cost, quality, and outcomes of population-based services and interventions.

- Developed by the Council on Linkages Between Academia and Public Health Practice (Council)

Meeting objectives

- Form a vision for transforming PHSR in the United States;
- Develop a strategy for improving coordination among funding agencies and organizations, which could include:
 - Articulating the specific roles, responsibilities, and commitments of each meeting participant to advancing PHSR, or
 - Establishing a coalition of funders that convenes several times a year;
- Craft unified messages to help PHSR enthusiasts sell the need for PHSR activities and infrastructure; and
- List next steps for advocating increased investment in PHSR among organizations in attendance and other institutions identified as potential partners.



**COUNCIL ON LINKAGES BETWEEN
ACADEMIA AND PUBLIC HEALTH PRACTICE**

**Public Health Systems Research
September 29, 2005 - Meeting Participants**

AcademyHealth

W. David Helms, PhD
President and CEO

**Agency for Healthcare Research and
Quality**

Ronda G. Hughes, PhD, MHS, RN
Senior Health Scientist Administrator
Center for Primary Care, Prevention, and
Clinical Partnerships

**Centers for Disease Control and
Prevention**

Robin Ikeda, MD, MPH
Associate Director for Science
Office of Workforce and Career
Development

Dennis Lenaway, MPH, PhD
Director

Office of Standards and Emerging Issues in
Practice
Office of the Chief of Public Health Practice

Grantmakers In Health

Katherine M. Treanor, MSW
Program Associate

**Health Resources and Services
Administration**

Kerry Paige Nesseler, RN, MS
Associate Administrator
Bureau of Health Professions

The Robert Wood Johnson Foundation

Debra Joy Pérez, MA, MPA, PhD
Program Officer

Mississippi Department of Health

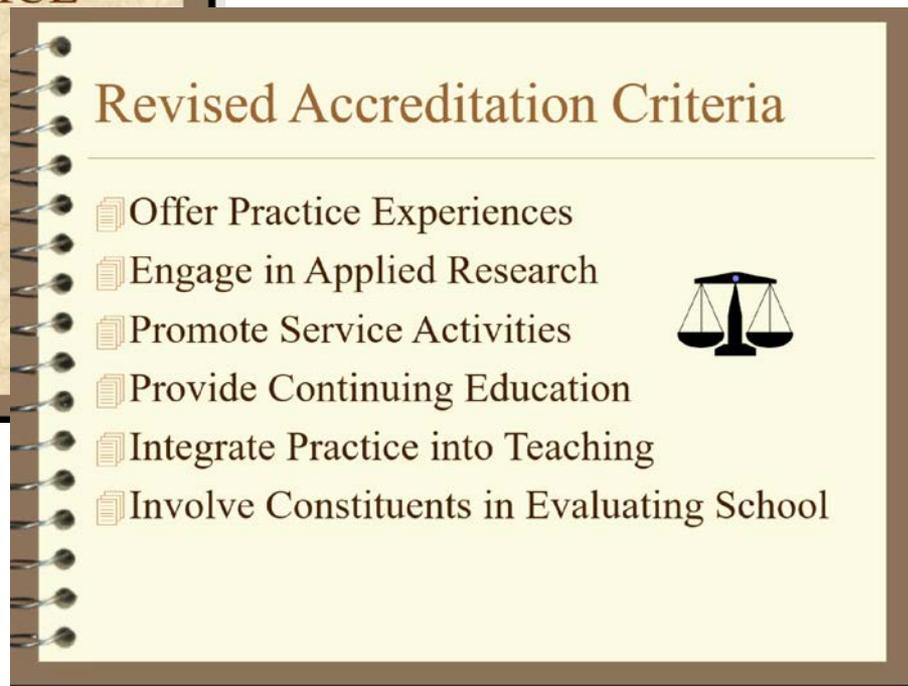
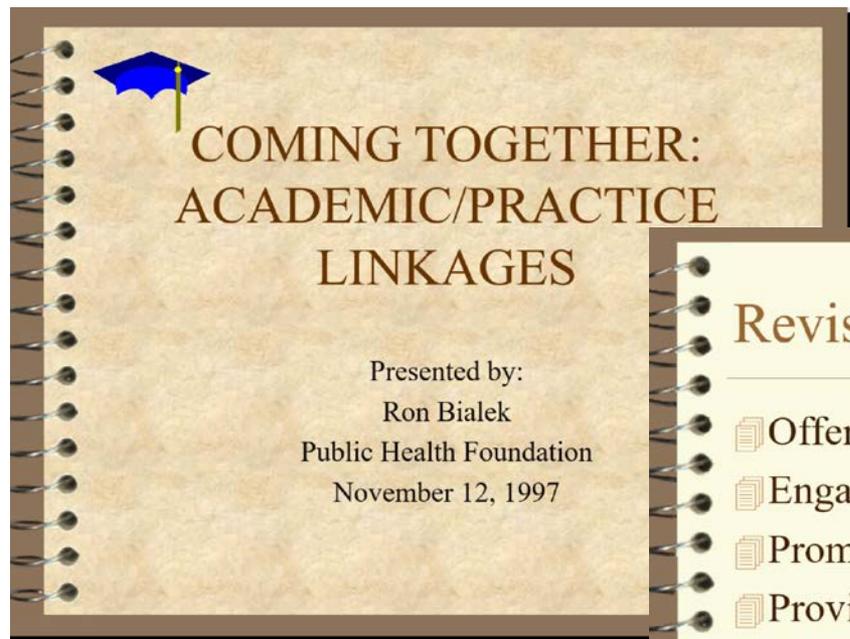
Peggy A. Honoré, DHA, MHA
Chief Science Officer

Co-Director of the Public Health Finance:
Advancing a Field of Study Through Public
Health Systems Research project

National Institutes of Health

Jon F. Kerner, PhD
Deputy Director for Research Dissemination
& Diffusion
Division of Cancer Control & Population
Sciences
National Cancer Institute

What About Accreditation Criteria for Schools and Programs of Public Health?



....And Health Departments



Standard 8.2: Ensure a competent workforce through the assessment of staff competencies, the provision of individual training and professional development, and the provision of a supportive work environment.			
MEASURE	PURPOSE	SIGNIFICANCE	
Measure 8.2.1 A Workforce development strategies	The purpose of this measure is to assess the health department's planning for employee training, implementation of those plans, and the development of core competencies.	Health departments must have a competent workforce with the skills and experience needed to perform their duties and carry out the health department's mission. Workforce development strategies support the health department, individual staff members, staff development, and the overall workplace environment. Employee training and core staff competencies assure a competent workforce.	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
1. Workforce development plan	1. The health department must provide a health department-specific workforce development plan. The workforce development plan must: <ul style="list-style-type: none"> • Address the collective capacity and capability of the department workforce and its units. • Address gaps in capacity and capabilities and include strategies to address them. • Be responsive to the changing environment and include consideration of areas where the technology advances quickly such as information management and (digital) communication science. • Be responsive to the changing environment and include considerations of areas where the field is advancing, for example, emergency preparedness training, health equity, and cultural competence. The plan must include: <ul style="list-style-type: none"> • An assessment of <u>current staff competencies against the adopted core competencies</u>. An example of nationally adopted core competencies is the "Core Competencies for Public Health Professionals" from the Council on Linkages Between Academia and Public Health Practice. The plan may also use <u>state developed or specially focused sets of competencies</u>, for example, nursing, public health preparedness, informatics, and health equity competencies. 	1 plan	2 years

....And the Guide to Community Preventive Services to Help Guide Practice?

Practice Guidelines for Public Health: Assessment of Scientific Evidence, Feasibility and Benefits

*A Report of the Guideline Development Project
for Public Health Practice*

*Advisory Group: Council on Linkages between
Academia and Public Health Practice*

OCTOBER 1995

Consensus Statement

March 25, 1998

Directly Observed Therapy for Treatment Completion of Pulmonary Tuberculosis Consensus Statement of the Public Health Tuberculosis Guidelines Panel

C. Patrick Chaulk, MD, MPH; Vahe A. Kazandjian, PhD, MPH; for the Public Health Tuberculosis Guidelines Panel

» **Author Affiliations**

JAMA. 1998;279(12):943-948. doi:10.1001/jama.279.12.943

Now an Ongoing Effort Supported by CDC

Welcome to The Community Guide! Let us know what you think of the website by completing this [quick survey](#).

 The Community Guide [Login or Register](#)

[Topics](#) [CPSTF](#) [Publications & Resources](#) [About](#) [GuideCompass](#)

Search The Community Guide [Search](#)

Your online guide of what works to promote healthy communities [About the Guide](#)



Interactive Digital Interventions Help Patients
The CPSTF recommends the use of interactive digital interventions to improve blood pressure control in patients with high blood pressure. [Read more >>](#)

Text Messages Improve Medication Adherence

Built Environment—Examples from the Real World

Explore Popular Features of The Community Guide

- 
[Attend a Webinar](#)
Join Community Guide scientists to learn more about CPSTF recommendations and the systematic
- 
[The Community Guide in Action: Stories from the Field](#)
Learn about people from across the country who have used The
- 
[Listen to the Experts](#)
Community Guide audio clips feature stories about the Community Guide in Action and shine a spotlight on public

A Newer Kid on the Block: Academic Health Department Learning Community



Academic Health Departments: Core Concepts

Definition

An academic health department (AHD), or teaching health department, represents a formal affiliation between an academic institution and a public health practice organization. Typically, an AHD joins a health professions school and a state or local health department, although other public health practice organizations may be involved. Health professions schools are academic institutions housing schools or programs in public health, medicine, nursing, dentistry, environmental health, health education, or any of a variety of other health fields.^{1,2}

The AHD arrangement is the public health equivalent of the "teaching hospital" affiliation that formalizes the relationship between medical schools and hospitals. It exists to strengthen the linkage between public health practice and its broad academic base and is designed to enhance public health education and training, research, and service. AHDs can serve as public health training sites for students of public health and the clinical health sciences, as well as sites for research and practice involving both academic and practice communities.^{1,2}

Attributes

A variety of types and levels of partnership exist between academic institutions and health departments. While these can represent productive collaborative relationships, potential benefits to both types of institutions may be maximized by formalizing the relationships between the partners. A comprehensive AHD may exhibit some or all of the following attributes:

- Involvement of, at minimum, one health professions school and one public health practice organization
- Formal written partnership agreements between institutions
- Shared personnel, often in the form of faculty or staff who are jointly appointed and funded
- Organizational structures that allow the sharing of resources between partnering institutions
- Exchange of resources or other forms of compensation between partnering institutions as services are provided
- Collaborative efforts to provide education and training for students and public health professionals grounded in public health theory and practice
- Joint proposal and implementation of research projects
- Shared support for and participation in providing public health services
- Collaborative and mutually beneficial relationships^{1,2}

Purpose

The AHD is meant to enhance public health education and training, research, and service by facilitating collaboration across the academic and practice communities. As such, it responds to several key issues facing the public health field. Use of the AHD model may help to address:

- Concerns regarding the separation of education and public health practice and the relatively low percentage of public health practitioners with formal public health education, faculty with public health practice experience, and graduates seeking employment in health departments
- Concerns related to the level of preparedness of students and public health professionals to meet local public health needs

Created: 2010 Dec 20
Revised: 2011 Jan 14

1

AHD Research Agenda

Academic Health Department Research Agenda

Logic Model Parameter	Potential Research Questions
Inputs	1. What models and theories of education and training are most effective in creating the conditions to establish AHDs?
	2a. What styles of leadership are most effective in establishing and sustaining AHDs? 2b. What styles of management are most effective in establishing and sustaining AHDs?
	3a. How do practitioners in settings with AHD partnerships differ from practitioners in settings without AHD partnerships in terms of background, training, and expertise? 3b. How do academicians in settings with AHD partnerships differ from academicians in settings without AHD partnerships in terms of background, training, and expertise?
	4a. What are the critical resources for establishing AHDs? 4b. What are the critical organizational environments for establishing AHDs?
	5. What is the variability across AHDs in resources, and how does such variability matter?
	6. What is the value of shared personnel in AHDs?
	7. Which types of personnel contribute most to AHDs?
	8. What arrangements for sharing personnel in AHDs have been successful?

Helping Academic Health Departments Grow

- Mentorship program
- Partnership agreements
- Webinars by wide variety of Academic Health Departments
- Examples of Academic Health Departments
- “Ask the Expert” column
- Listserv
- Profiles

- Over 750 members!!!!



Great Challenges and Opportunities Ahead for the Council on Linkages

- Public Health 3.0
 - Informatics
 - Leadership
 - Chief Health Strategist
- Work across sectors
- Increase awareness and use of the Core Competencies
- Continue to foster Academic Health Departments and go beyond health departments and academic institutions
- Achieve ongoing surveillance of the public health workforce
- Create and implement a national public health workforce action plan
- Sustain and grow the Council on Linkages
- **SIMPLY BUSINESS AS USUAL.....**

Demonstrating Council Impact

- Speakers: Bill Keck, MD, MPH, Council Chair, and Kathleen Amos, MLIS, Council Assistant Director

How Has the Council Impacted Your Organization and Its Members or Constituents?

Examples of Impact of Council Initiatives

- State, territorial, and local health departments use the Core Competencies for developing training plans, creating job descriptions, conducting performance evaluations, and other workforce development activities, as described in the ASTHO and NACCHO Profiles studies
- APHL used the Core Competencies and related resources in developing and implementing the [Competency Guidelines for Public Health Laboratory Professionals](#)
- Assistance in building AHD partnerships is being provided to health departments and schools and programs of public health through the [AHD Learning Community](#)
- CEPH used the Core Competencies in revising its accreditation criteria for schools and programs of public health

How Has the Council Impacted Your Organization and Its Members/Constituents?

- Today's discussion:
 - Impact Council member organizations are seeing/experiencing from Council initiatives, activities, and products
 - Ways Council staff can best demonstrate impact
 - Opportunities to increase the Council's impact

- Share your data and examples with Kathleen at kamos@phf.org

Council Member Request: New Approaches to Practice-based Research

- Speaker: Patrick Lenihan, PhD, National Network of Public Health Institutes (NNPHI)

Performance Improvement and Population Health Competencies

- Speaker: Kathleen Amos, MLIS, Council Assistant Director

Competencies for Performance Improvement Professionals in Public Health (Draft)

- Define and describe skills and competencies desirable for PI professionals in public health
- Expand upon the Core Competencies for PI professionals

➤ Core Competency

Develops strategies for continuous quality improvement

➤ Draft Performance Improvement Competency

Coordinates development, implementation, and evaluation of a continuous quality improvement plan

Competencies for Performance Improvement Professionals in Public Health (Draft)

- Describes how quality improvement and performance management methods and tools are used to improve individual, program, and organizational performance
- Coordinates the use of teams from all levels of the organization to improve program and organizational performance
- Aligns quality improvement and performance management with organization and community plans, such as the strategic plan, community health improvement plan, workforce development plan, communication plan, and all hazards emergency operations plan

Priority Competencies for Population Health Professionals (Draft)

- 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
- Types of activities:
 - Community health needs assessments
 - Community health improvement plans
 - Implementation of community-based interventions
 - Coalition building

Priority Competencies for Population Health Professionals (Draft)

- Community Health Assessment
- Community Health Improvement Planning and Action
- Community Engagement and Cultural Awareness
- Systems Thinking
- Organizational Planning and Management

Feedback Process for Performance Improvement and Population Health Competencies

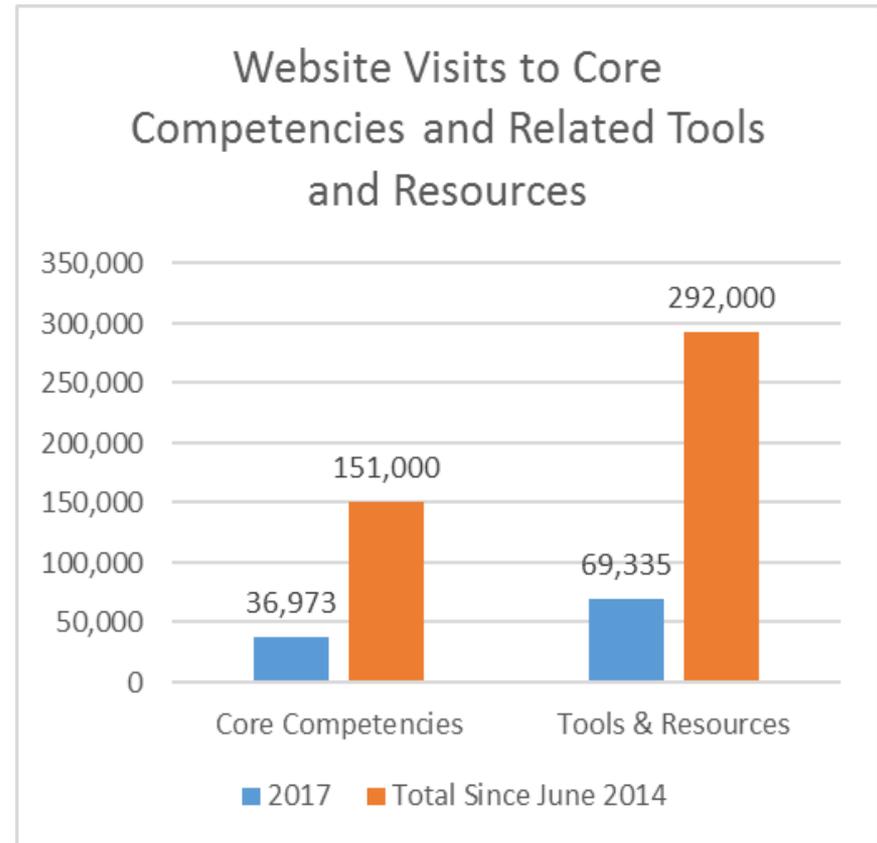


Core Competencies for Public Health Professionals

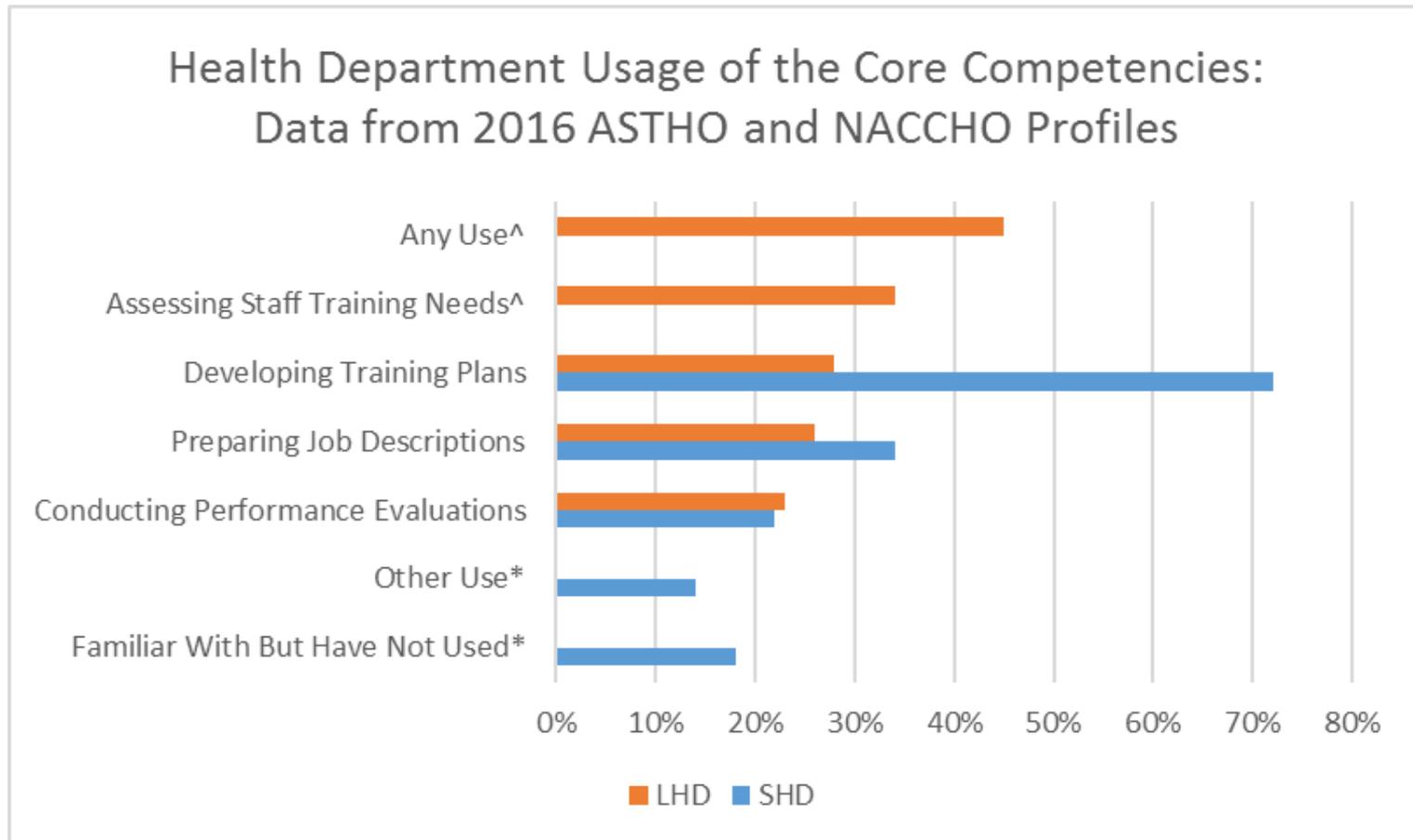
- Speaker: Janet Place, MPH, Core Competencies Workgroup Co-Chair

Usage of the Core Competencies

- Website visits continued to grow
- Most popular resources and tools:
 - [Competency assessments](#)
 - Collection of [job descriptions](#)
 - Collection of [examples of how organizations use the Core Competencies](#)
 - Collection of [workforce development plans](#)



ASTHO and NACCHO Profile Data from 2016



Core Competencies Tools and Resources

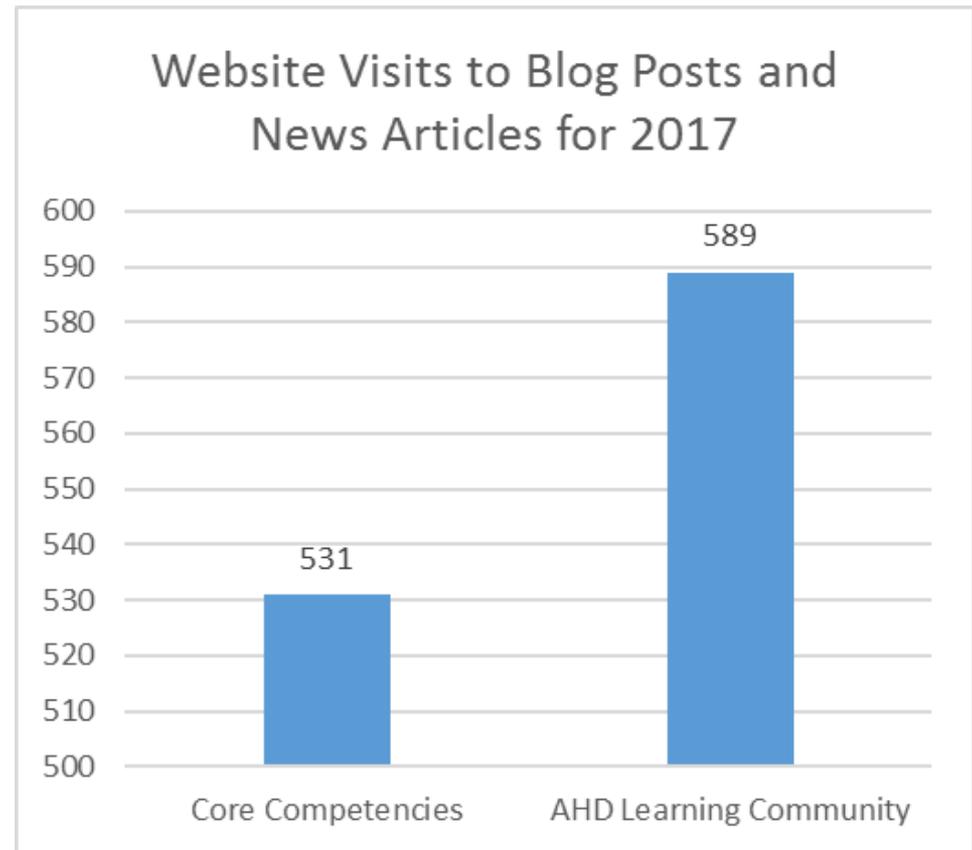
- Modified version of the Core Competencies developed to support organizations in using the Core Competencies
- New tool, *Determining Essential Core Competencies for Public Health Jobs: A Prioritization Process*, released in June and featured during the Public Health Improvement Training, a webinar, and an APHA Annual Meeting session
- 12 new job descriptions and a new workforce development plan that incorporate the Core Competencies added to the online collections
 - Additional examples welcome by email to Janelle at jnichols@phf.org
- Competency sets that draw on the Core Competencies continued to be developed, including the Priority Competencies for Population Health Professionals and Competencies for Performance Improvement Professionals in Public Health

Additional Highlights

- After considering requests from the public health community and usage of the Core Competencies, the Council decided not to open the Core Competencies for review this year
- Council staff participated in a [PH WINS](#) (Public Health Workforce Interest and Needs Survey) workgroup to support incorporation of concepts from the Core Competencies into their assessment tool
- [Core Competencies Workgroup](#) grew to nearly 100 members
- [Performance Improvement Competencies Subgroup](#) formed to support refinement of the Performance Improvement Competencies and includes nearly 90 members
- Core Competencies Workgroup began a discussion of Council involvement in recognition of discipline-specific competency sets based on the Core Competencies

Additional Highlights

- 3 blog posts and 1 news article highlighting work related to the Core Competencies published on the PHF website and viewed more than 500 times

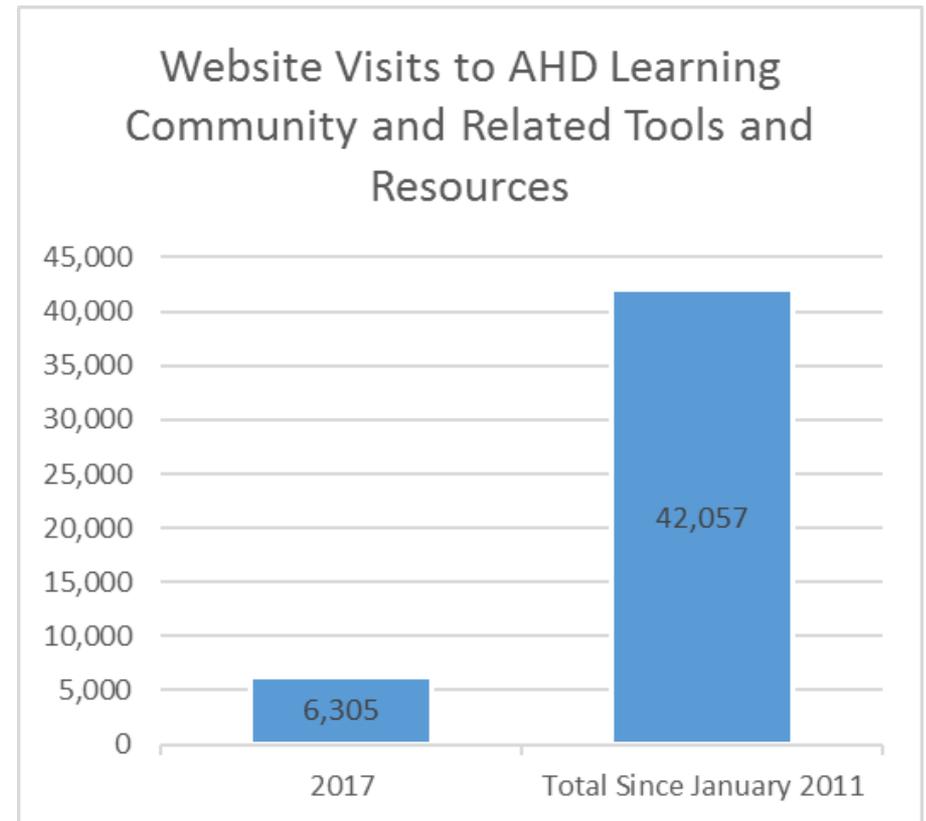


Academic Health Department Learning Community

- Speaker: Bill Keck, MD, MPH, AHD Learning Community Chair

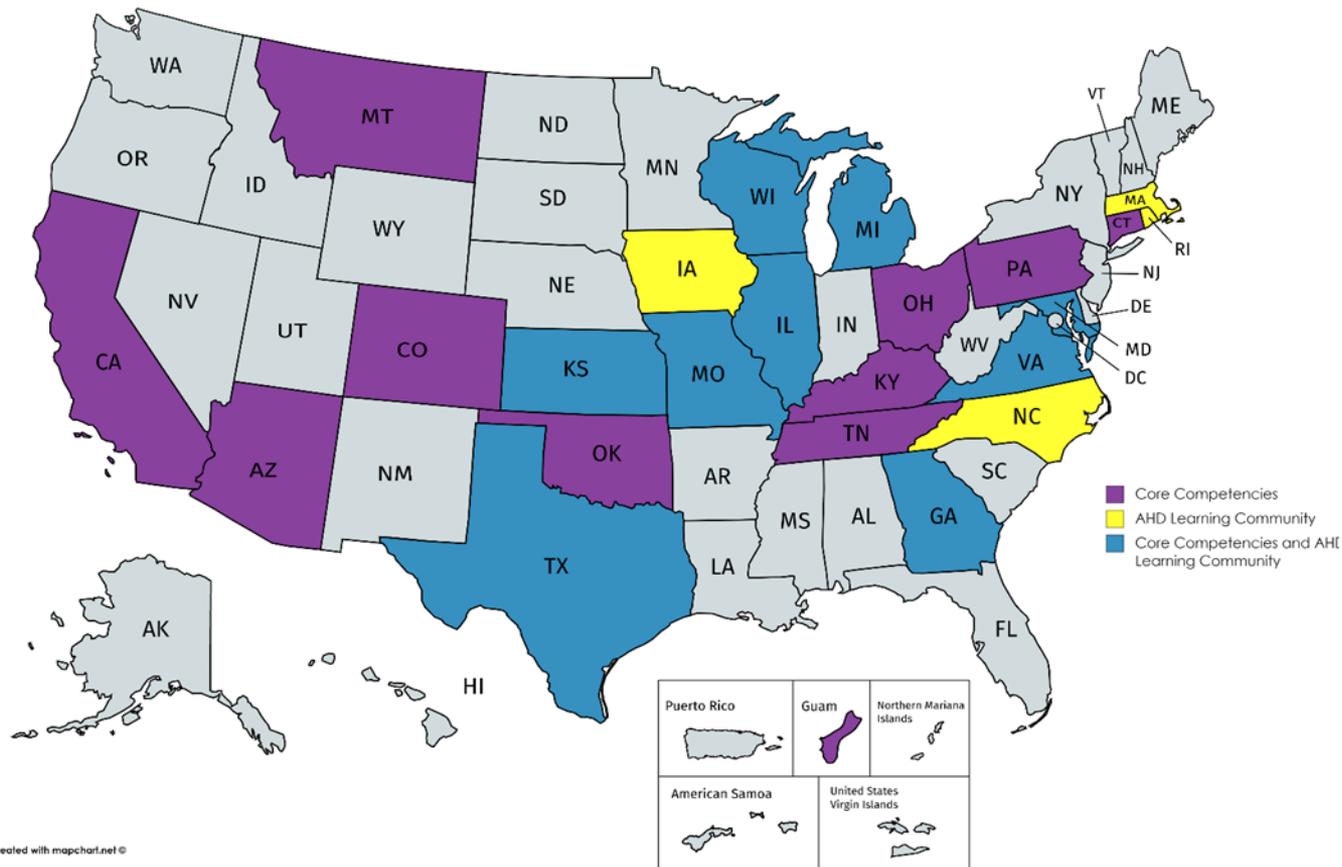
Engagement with AHD Learning Community

- Membership grew to approximately 750 members, representing organizations in all 50 states, DC, and 4 US territories
- Website visits continued to grow

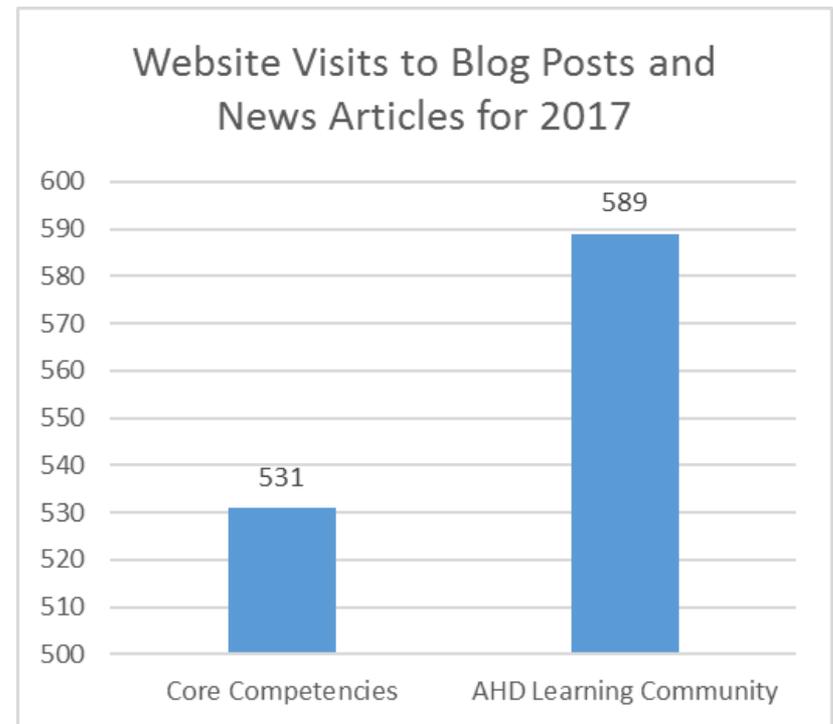
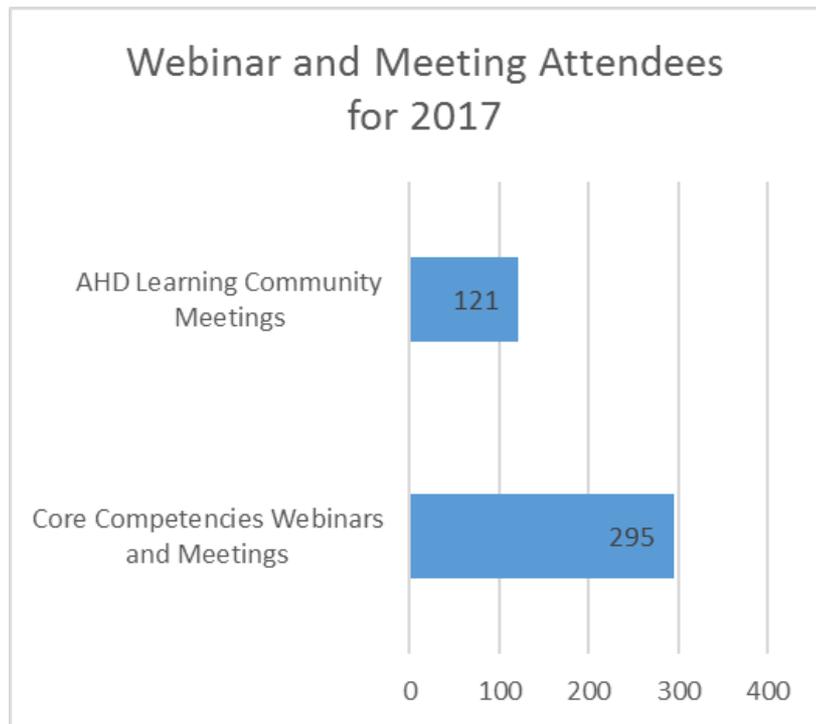


Engagement with AHD Learning Community

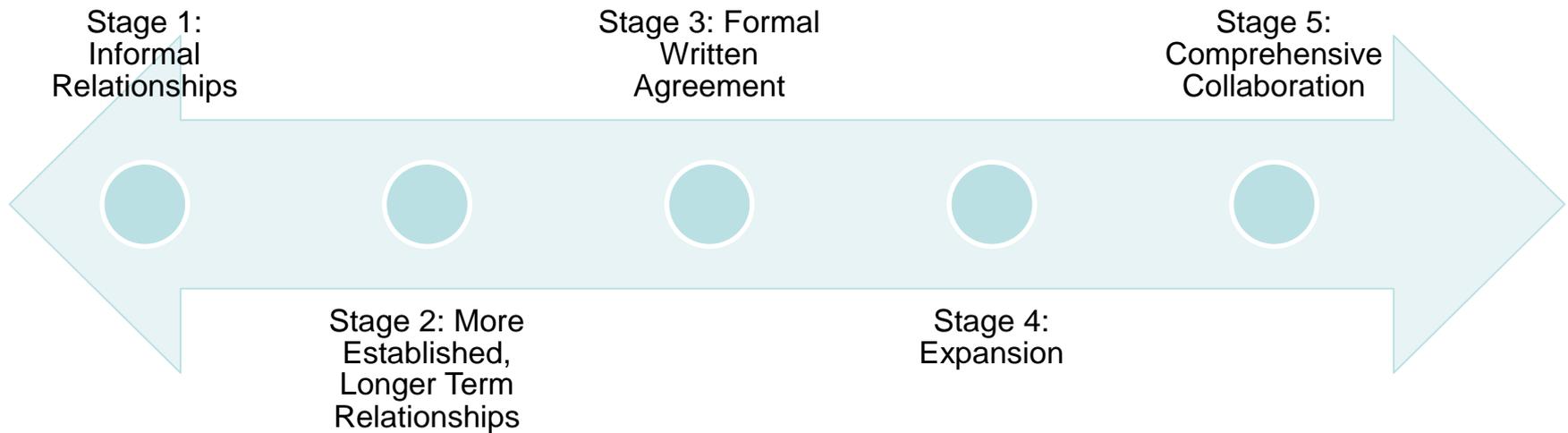
- Council staff responded to more than 25 technical assistance requests, serving more than 20 organizations in 13 states



AHD Learning Community Tools and Resources



Staged Model of AHD Development



Additional Highlights

- Article on development of the AHD Research Agenda published in September 2017 issue of the *American Journal of Public Health*
- 7 AHD partnerships and 3 partnership agreements added to the Council website
 - Additional partnerships or examples of agreements may be shared with Janelle at jnichols@phf.org
- AHD Mentorship Program created 7 additional mentor-mentee matches, bringing the current total to 15
 - Expressions of interest in participating in the program can be sent to Janelle at jnichols@phf.org

Other Business and Next Steps