The Council on Linkages Between Academia and Public Health Practice (Council) has made great strides in the field of public health. Among its past accomplishments, the Council has:

- Fostered academic/practice linkages between academic institutions and practice agencies and organizations
- Developed the Core Competencies for Public Health Professionals to guide curricula and workforce development
- Promoted Public Health Systems Research (PHSR) to increase understanding of and improve the public health infrastructure
- Focused the field on evidence-based strategies to improve worker recruitment and retention and combat emerging worker shortages
- Influenced the development of the <u>Healthy People Infrastructure Focus Area</u>
- Initiated a public health practice guidelines effort
- Established a framework that could be used to develop a national public health practice research agenda
- Worked on a State Association of County Health Officials (SACHO) Demonstration Project aimed at bringing together the academic and practice communities in Ohio

# **Academic/Practice Linkages**

One of the Council's primary objectives is to bring together the academic and practice communities to assure that public health education is relevant to practice and to encourage lifelong learning among public health workers. To help foster collaboration, between 1993 and 2006, the Council presented annual "Linkages Awards" to recognize exemplary community-based collaborative activities between public health practice agencies and academic institutions of higher learning.

The Council also compiled a database of more than 200 examples of academic/practice linkages and disseminated tools to help establish and strengthen these partnerships. The Council has promoted the development of academic health departments and influenced the revision of accreditation criteria for public health schools and graduate programs to incorporate practica and other linkage activities.

#### More to be done:

- Continued identification and dissemination of academic/practice partnerships through various activities
- Provision of technical assistance and identification/development of additional tools
- Convening/advising role in the development of potential systems to certify public health workers and/or accredit health departments

## **Workforce Competencies**

In 2001, the Council adopted the original set of Core Competencies for Public Health Professionals—a consensus set of skills, knowledge, and attitudes desirable for the broad practice of public health. In drafting the original core competencies set, the Council received feedback from over 1,000 public health professionals. More recently, Tier 1 and Tier 3 (as well as minor changes to Tier 2) Core Competencies were adopted by the Council on May 3, 2010.

The competencies are being used by public health practice and academic organizations for a variety of purposes. Their widespread use is evidenced by a 2006 <a href="survey">survey</a>, in which 91% of the academic institutions who responded to the survey indicated that they integrated the Core Competencies into their curricula. Since developing the Core Competencies, the Council has provided technical assistance to help academic and practice groups use the Core Competencies. The Council has also compiled tools to facilitate their use.

#### More to be done:

- Research/demonstration project to assess the effectiveness of competencies-based training and integration of competencies into workforce development efforts
- Creation of additional tools to help academic institutions and agencies integrate competencies
- Documentation of how various competencies sets relate and can be used together

## **Public Health Systems Research (PHSR)**

PHSR examines critical questions related to the workforce, financing, organization, and management of public health systems in order to build the evidence base to guide decision makers in improving public health practice. The Council has engaged in a variety of activities to generate greater attention to studying public health infrastructure, including:

- Convening annual <u>PHSR Leadership Forums</u> at American Public Health Association Annual Meetings to bring together individuals who conduct, fund, and use research;
- Helping to establish the PHSR Interest Group at AcademyHealth; and
- Disseminating research agendas and creating a series of <u>brief agendas</u> to highlight highpriority research questions.

These efforts have resulted in increased funding for, and publication of, PHSR studies.

#### More to be done:

- Prioritization of research agendas
- Development of a toolkit to help researchers seek funding for PHSR
- Creation of a "knowledge network" to connect researchers to practitioners in need of evidence to drive practice, and to each other

## **Recruitment and Retention**

In response to concerns about emerging public health worker shortages caused by projected high rates of retirement and other factors, the Council has strived to focus the field on evidence-based strategies to improve the recruitment and retention of public health workers, students, and faculty.

A January 2005 Council forum provided an opportunity for representatives from government and the teaching and medical professions to share their experiences with alleviating worker shortages. After hearing those presentations, Council members generated a list of potential strategies to better recruit and retain workers and students, and to better equip the current workforce and new workers. The Council has identified and disseminated information about existing research and example programs that fit in with these strategies.

#### More to be done:

- Creation of a toolkit to help public health academic and practice organizations improve recruitment and retention
- Development of a training program to help new workers (perhaps with limited public health experience) quickly prepare for their positions
- Promotion/facilitation of research and strategic planning in this area

## **Development of the Healthy People Infrastructure Focus Area**

### **Initiation of the Public Health Practice Guidelines Effort**

In 1994, the Council became involved in developing public health practice guidelines. This project, which received funding from the W.K. Kellogg Foundation, created a set of draft guidelines related to cardiovascular disease prevention and tuberculosis treatment completion. This effort helped spur on the development of the *Guide to Community Preventive Services*, by the Centers for Disease Control and Prevention.

# **Development of a National Public Health Practice Research Agenda**

In 1998, the Council began developing a plan that could lead to a national public health practice research agenda. Subsequently, an ad hoc subcommittee of the Council developed a framework using both Healthy People 2010 objectives and the 10 Essential Public Health Services to identify, articulate, and prioritize public health research needs. For a discussion of the framework, please see the article <u>Developing a Public Health Research and Applications Agenda: Tools for the 21st Century</u> (PDF) in the Spring 1999 issue of *The Link*. For a more detailed description of this project please see the concept paper, <u>Developing An Agenda For Public Health Practice Research</u> (PDF). Unfortunately, the Council did not receive funding to conduct a pilot test on this framework.

# State Association of County Health Officials (SACHO) Demonstration Project

The Council worked on a demonstration project designed to bring together the academic and practice communities in Ohio in order to develop and solidify academic/practice linkages. The project involved surveying local health departments and academic institutions that train health

professions students in Ohio. The goal of this effort was to gain a better understanding of "what it takes" to make linkages actually happen.