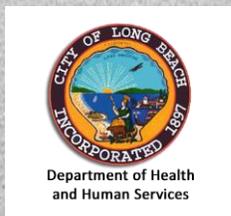


Workforce Development and Training Survey Report and Training Plan

City of Long Beach Department of Health and Human Services



The Health Department engaged staff to develop the workforce development plan. Public health core competencies assessment is found on PDF page 10 of the document. The training topics and schedule are found on PDF page 13. The plan update log that demonstrates that the plan is updated annually is found on PDF page 14.

Introduction

With opportunities and challenges presented by health reform and an ever-increasing need for public health departments to help promote, protect, and preserve health, there is an even greater impetus for public health workers to gain, maintain and adapt core skills that respond to the dynamic needs of the community they serve. Public health serves a unique role in ensuring healthy and safe communities because of its multi-disciplinary workforce and focus on population health.

By 2020, the nation will face a shortfall of more than 250,000 public health workers. Shortages of public health physicians, public health nurses, epidemiologists, health educators, and administrators are anticipated (Association of Schools of Public Health, 2008). Furthermore, since 2008, local health departments shed nearly 44,000 jobs (National Association of County and City Health Officials, 2013). These statistics present a looming public health crisis and underscore the need to maintain a high performing and highly adaptable public health workforce.

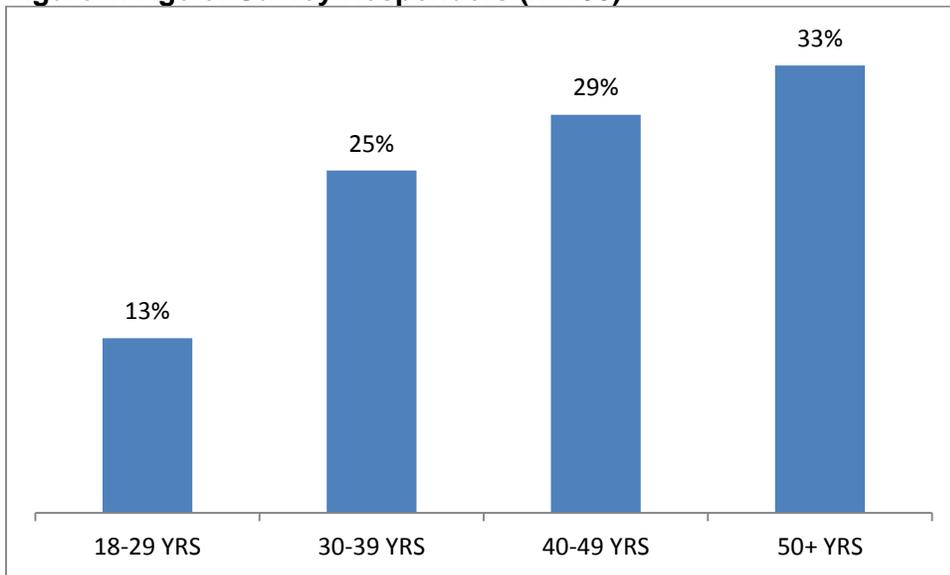
In order to assess the training and professional development needs of Long Beach Department of Health and Human Services staff, the Accreditation Task Force developed a staff survey to solicit staff feedback on key training topics staff need in order to be successful in performing their duties. In addition, the survey included a self-assessment of the core competencies for public health workers. The Core Competencies for Public Health Professionals (Core Competencies) are a consensus set of skills identified by the Council on Linkages between Academia and Public Health Practice (Council on Linkages) as being desirable for the delivery of the Essential Public Health Services.

The Workforce Development Staff Survey underwent review and approval from the Accreditation Task Force and was administered to staff via SurveyMonkey in July 2012. A total of 174 surveys were completed. The outcome of the survey is described in this document and was used to help inform the development of a Workforce Development Plan found on page 13.

Survey Participant Demographics

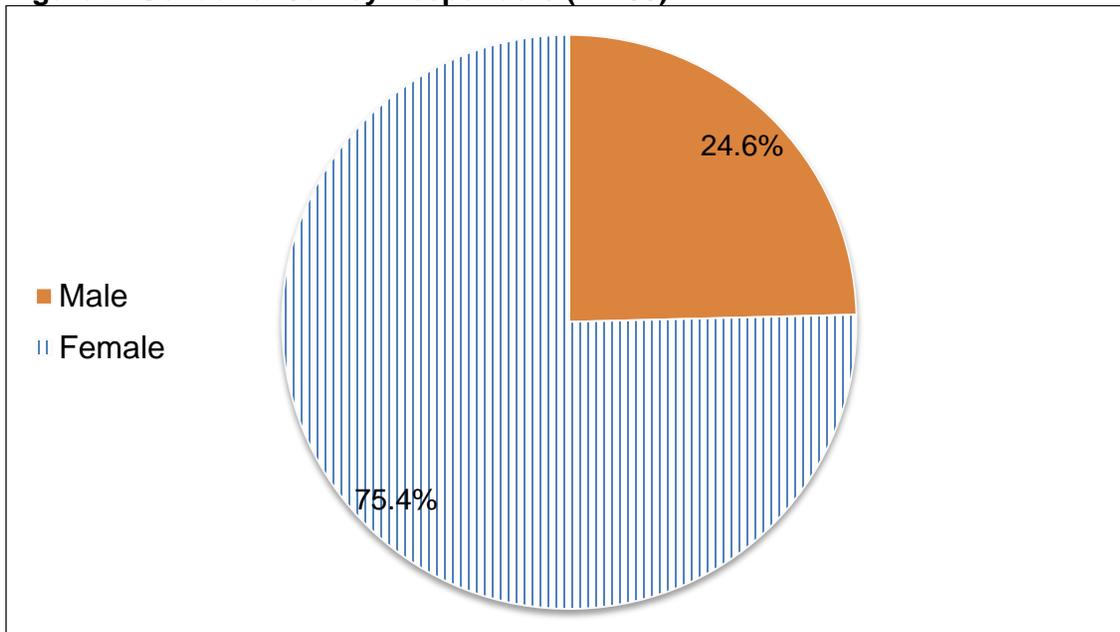
The Long Beach Department of Health and Human Services is made up of 341 full-time equivalent (FTE) staff (fiscal year 2012). A total of 195 staff answered one or more questions on the survey, with 174 staff completing all sections of the survey. The results are shown in the following figures.

Figure 1: Age of Survey Responders (n=195)



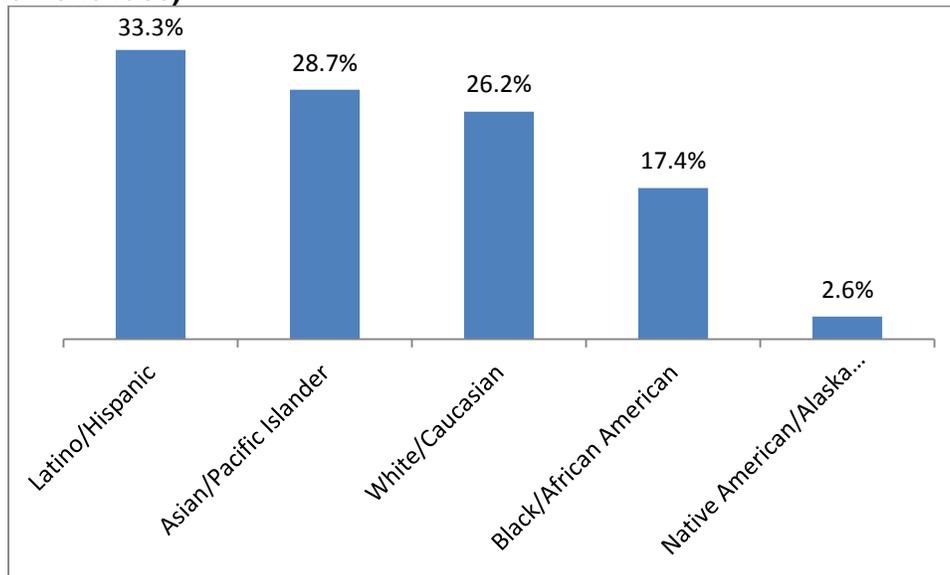
A large majority of the employees who answered the survey fell in the age 30 and above category. Almost 13% (25) were in the 18-29 age group; 25% (49) were ages 30-39; 29% were ages 40-49; and nearly 33% were in the 50 and above age group.

Figure 2: Gender of Survey Responders (n=195)



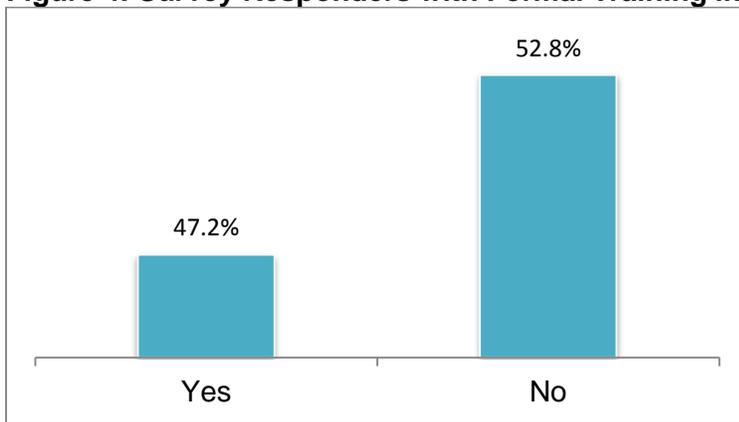
Of the employees that answered the survey, 75% were females. This is reflective of the Department's profile where the overwhelming majority of its employees are females.

Figure 3: Race/Ethnicity of Survey Responders (n=195; survey allowed for identification of more than one race)



Long Beach is highly diverse in its racial and ethnic composition. The racial and ethnic profile of the staff who responded to the survey reflects a diverse workforce. Thirty-three percent of survey respondents were Latino/Hispanic; nearly 29% were Asian/Pacific Islander; 26% were White/Caucasian; 17% were Black/African American; less than 1% were of Native American/Alaskan Native/Hawaiian descent or representing “Other” race.

Figure 4: Survey Responders with Formal Training in Public Health (n=195)

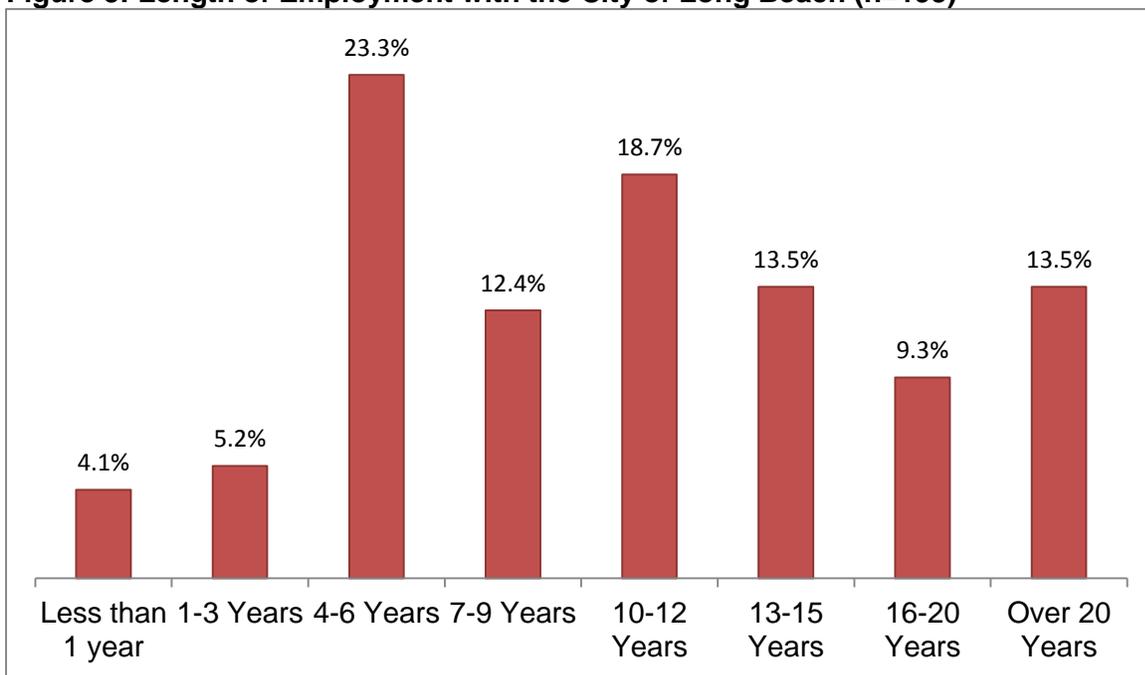


Formal training in public health of employees, degrees, certificates, license, and/or courses provides an assessment of the various academic or professional backgrounds that the employees bring to the Health Department. Over half of the survey participants (52.8%) indicated not having any formal training in public health specifically.

Among those staff who indicated that they had formal training in public health, responders noted the following degrees, licenses, certificates, and/or coursework in public health:

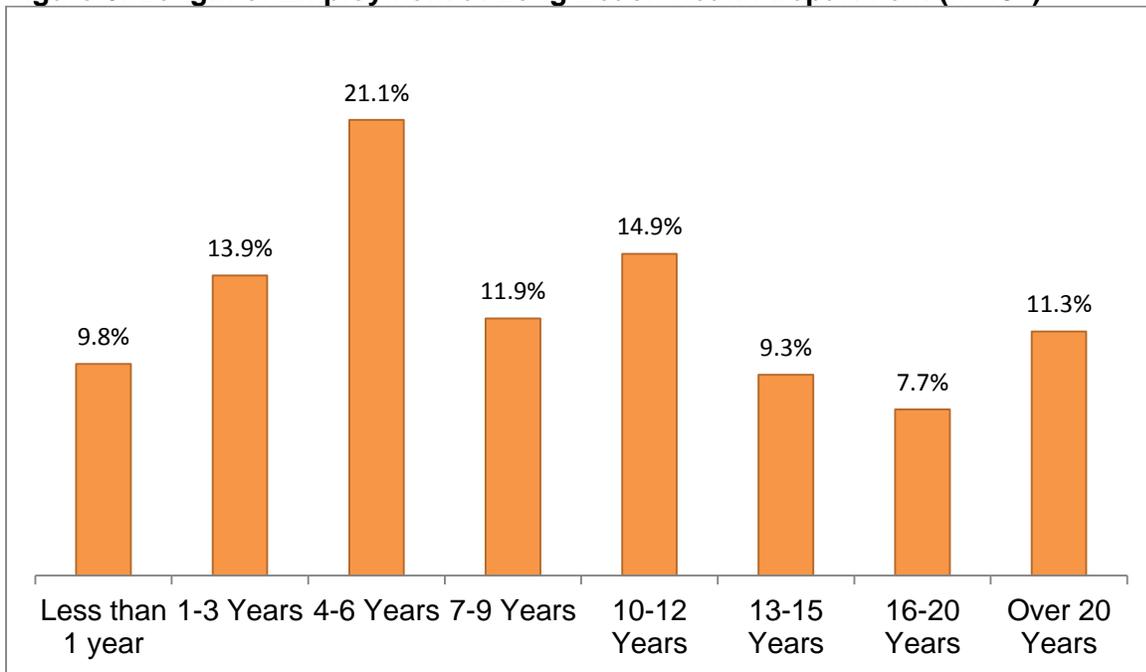
- Bachelor's or Master's degree in public health or health sciences
- Registered Nurse
- Public Health Nurse
- Medical Doctor
- Certified Health Education Specialist
- Registered Environmental Health Specialist
- Health Sciences Certification or Associate's Degree
- HIV Tester
- Registered Dietician

Figure 5: Length of Employment with the City of Long Beach (n=193)



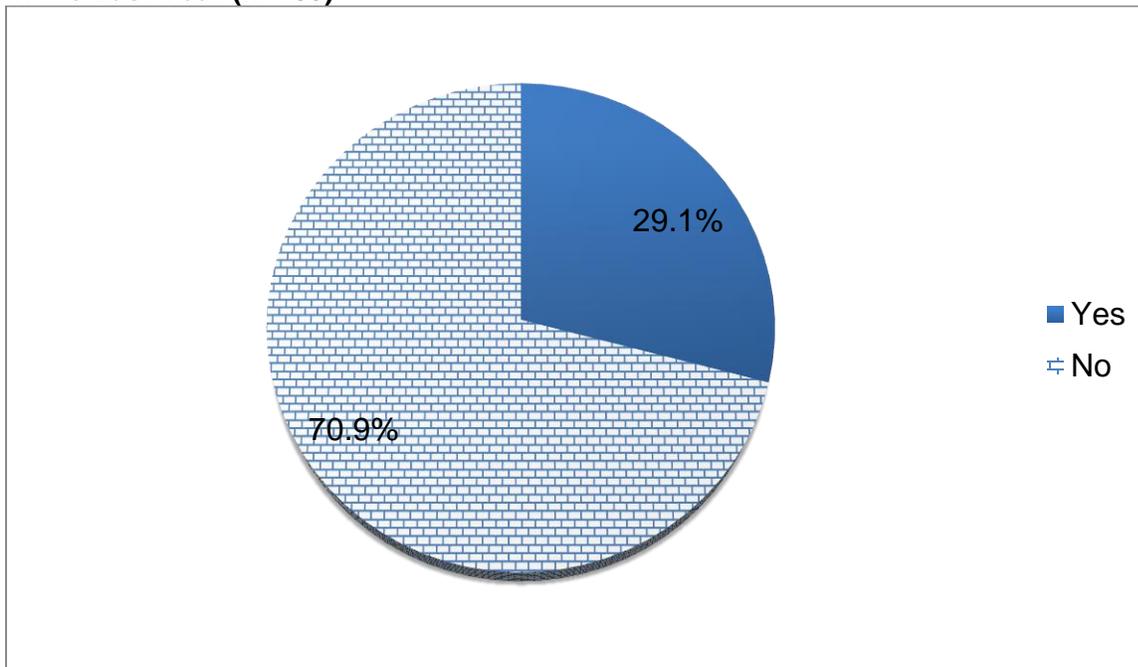
Staff who answered the survey indicated a long tenure with the City of Long Beach. Slightly over 23% (45) have worked for the City of Long Beach for 4 to 6 years and well over half of the survey responders (54.9% or 106) have worked for the City of Long Beach for 10 years or more.

Figure 6: Length of Employment at Long Beach Health Department (n=194)



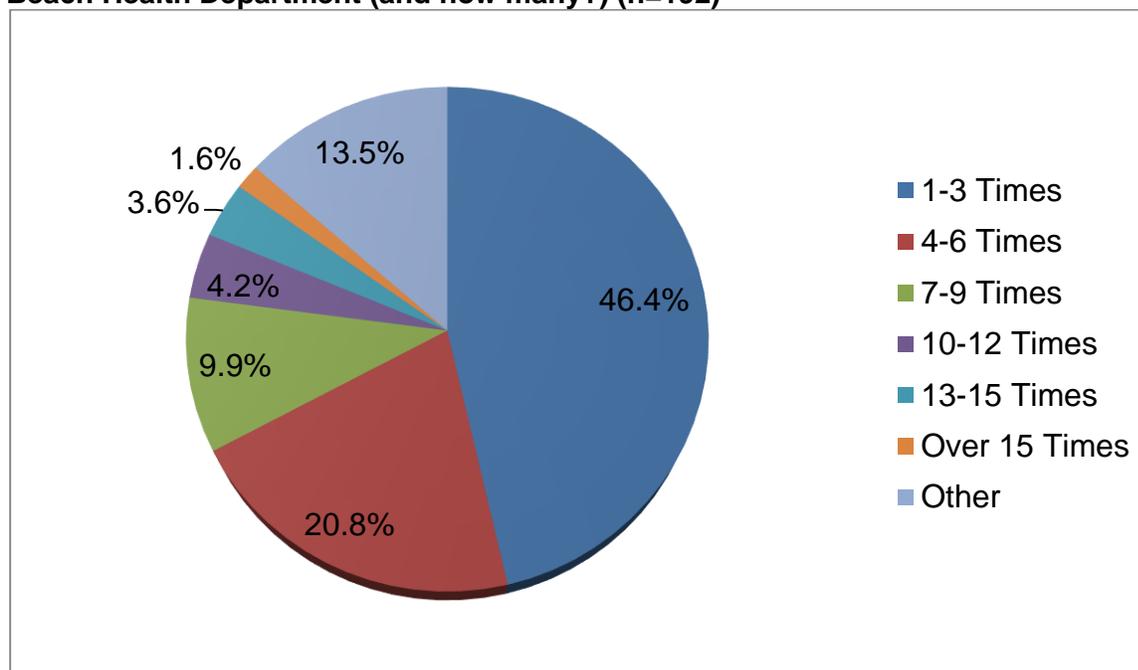
Both figures suggest that staff tend to remain employed with the City or the Health Department for at least 4 years. Slightly over 43% (43.2% or 84) have worked for the Health Department for ten years or more.

Figure 7: Survey Responders with Performance Reviews Conducted by their Supervisor in the Last Year (n=189)



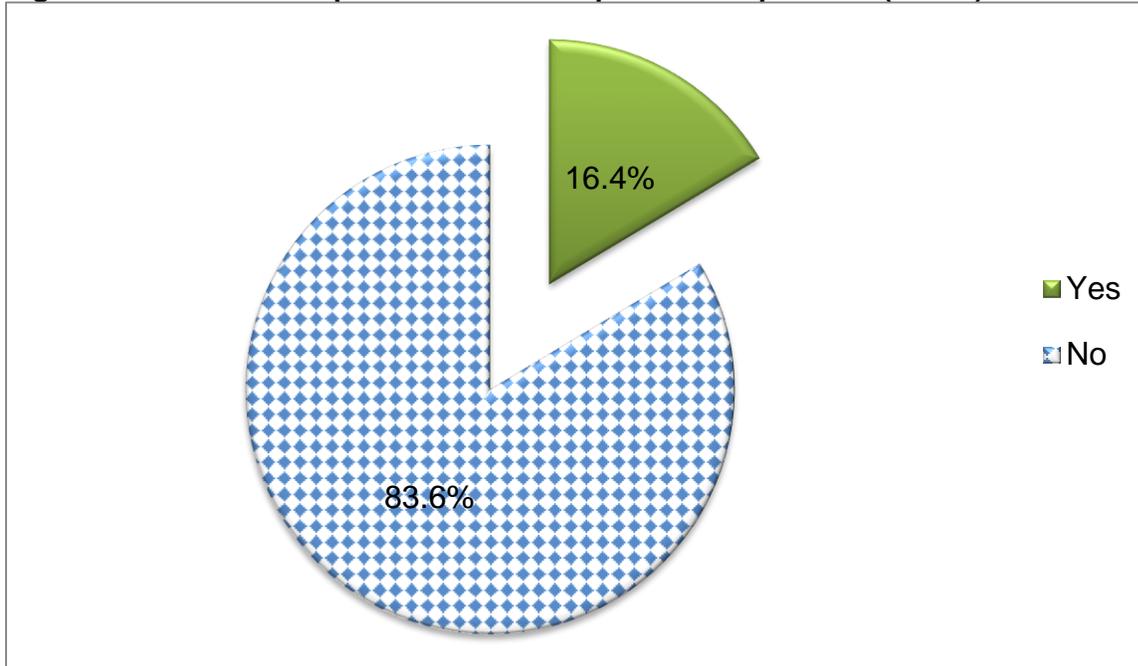
When asked about performance reviews, 71% (134) of the responders indicated that they did not receive a performance review from their supervisors in the last year. This finding suggests a critical gap in providing feedback to staff regarding their performance and opportunities for improvement in skills and competencies.

Figure 8: Survey Responders with Performance Review during Employment with Long Beach Health Department (and how many?) (n=192)



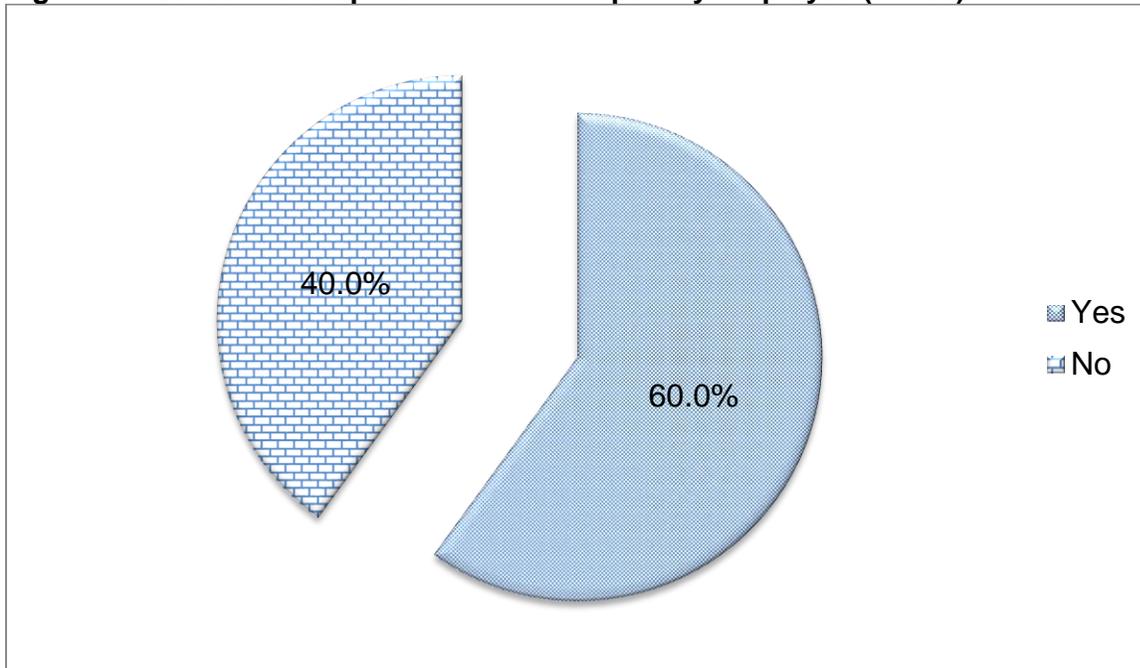
Slightly over 46% (89) of staff who answered the question, indicated that they received between 1 to 3 performance reviews during their employment with the Health Department. Another 21% (40) received 4 to 6 performance evaluations during their employment with the Health Department.

Figure 9: Career Development Plan Developed with Supervisor (n=189)



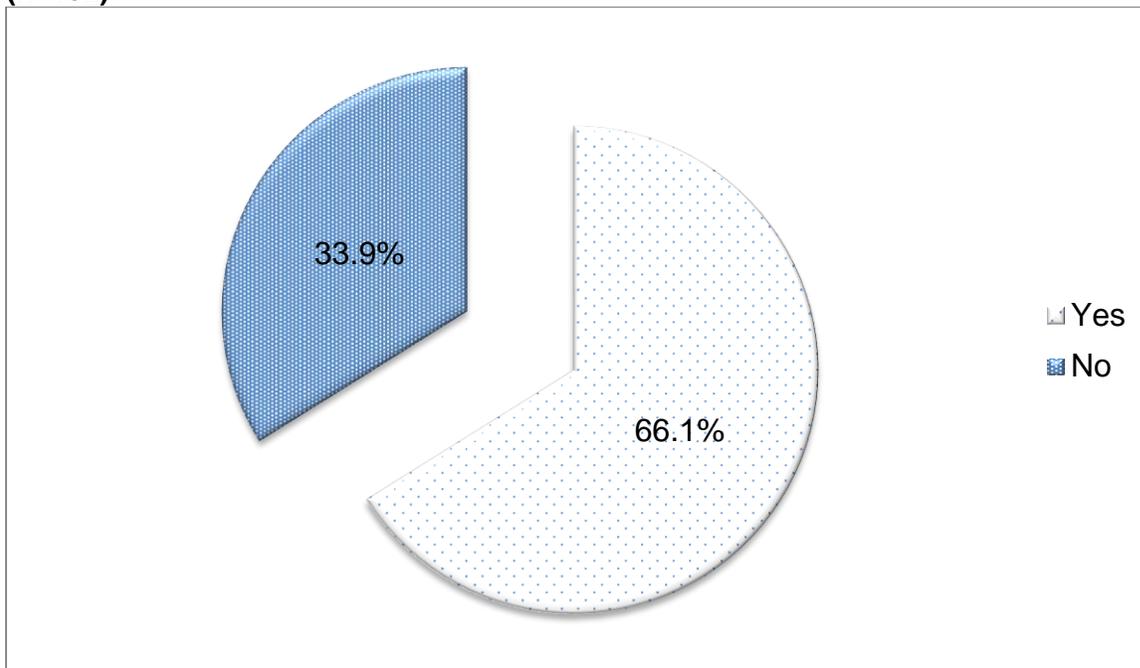
When asked if they have a career development plan developed with their supervisor, nearly 84% (158) of the responders responded “no” to this question. This finding suggests another critical gap in providing mentorship and coaching to staff in order to advance their educational and career aspirations.

Figure 10: Career Development Plan Developed By Employee (n=190)



When asked if they have a career development plan developed on your own, 60% (114) of the responders responded “yes” to this question. This finding suggests that many staff take the initiative to take charge of their personal career development goals.

Figure 11: Employee Plans to Go Back to School to Improve Skills or Advance Level (n=192)



When asked if they have plans to go back to school to improve their skills or advance their educational level, 66% (127) of the survey participants responded “yes”. This result suggests

an interest or personal commitment among staff to further their educational goals and they seek opportunities to improve their skills.

Table 1: Top 5 Skills Needed

Skills	What 5 skills do you feel are the most important for YOU to develop?	What 5 skills do you feel are the most important for YOUR SUPERVISOR to develop?	If you are a supervisor, what 5 skills do you feel are the most important for YOUR STAFF to develop?
Customer service	X	X	X
Leadership	X	X	X
Management	X	X	X
Mental health	X		
Public speaking	X		
Communication		X	X
Organization		X	
Team building			X

The survey invited staff to identify the top 5 skills they needed to develop (self); what skills they felt their supervisor needed to develop; and if they were a supervisor, what skills they felt were important for their subordinates to develop. Table 1 above summarizes the top skills identified by the survey responders. The commonly identified skills needed by frontline staff and supervisors were customer service, leadership, and management.

PDF pages 10-12 shows how the Health Department assessed staff competencies.

Public Health Core Competencies Self-Assessment

The survey included a self-assessment of the core competencies for public health workers. The Core Competencies for Public Health Professionals (Core Competencies) are a consensus set of skills identified by the Council on Linkages between Academia and Public Health Practice (Council on Linkages) as being desirable for the delivery of the Essential Public Health Services. Staff were instructed to think about what level they are CURRENTLY able to perform the skill for each competency and rate their level of proficiency by using a scale from "none" to "proficient". The tables below summarize the number of responses for each core competency according to the skill level scale. A total of 175 staff answered all the questions under the self-assessment section and 21 skipped the section.

Table A: Analytical/Assessment (n=175)

Includes the ability to gather and synthesize data on a broad range of issues and conditions that impact the public's health.

None	Aware	Knowledgeable	Proficient	Rating Average
10	64	70	31	2.70

Seventy staff who answered this question, rated their analytical and assessment skills as “knowledgeable”, followed by 64 “aware”, 31 “proficient”, and 10 “none”.

Table B: Policy Development/Program Planning (n=175)

Knowledge and ability to understand how scientific data and societal, environmental and political issues and conditions impact population health and how laws, regulations, statutes, and programs or services lead to long-term improvement in health outcomes.

None	Aware	Knowledgeable	Proficient	Rating Average
19	69	59	28	2.55

Sixty nine staff who answered this question, rated their policy development and program planning skills as “aware”, followed by 59 “knowledgeable”, 28 “proficient”, and 10 “none”.

Table C: Communication (n=175)

The ability to use written, verbal, and non-verbal language to convey critical information to individuals and groups.

None	Aware	Knowledgeable	Proficient	Rating Average
2	20	74	79	3.31

Seventy nine staff who answered this question, rated their communication skills as “proficient”, followed by 74 “knowledgeable”, 20 “aware” and 2 “none”.

Table D: Cultural Competency (n=175)

Ability to understand, appreciate, and interact with persons or groups from cultures, belief systems, languages, and lifestyles other than one's own.

None	Aware	Knowledgeable	Proficient	Rating Average
1	29	67	78	3.27

Seventy eight staff who answered this question, rated their cultural competency skills as “proficient”, followed by 67 “knowledgeable”, 29 “aware”, and 1 “none”.

Table E: Community Dimensions of Practice

The ability to recognize and use effectively community partnerships, relationships, assets, and resources to inform and design public health policies and programs.

None	Aware	Knowledgeable	Proficient	Rating Average
18	53	67	37	2.70

Sixty seven staff who answered this question, rated their community dimensions of practice skills as “knowledgeable”, followed by 53 “aware”, 37 “proficient”, and 18 “none”.

Table F: Public Health Sciences

Knowledge of the scientific foundation of the field of public health, its core and essential functions; ability to apply scientific methods and evidence to inform and design public health policies and programs.

None	Aware	Knowledgeable	Proficient	Rating Average
35	58	58	24	2.41

Fifty eight staff who answered this question, rated their public health sciences skill as “knowledgeable”, followed by an equal number of “aware” and 35 “none”. Twenty four responders indicated that were “proficient” in their public health sciences skill.

Table G: Financial Planning and Management

Knowledge of governmental budget processes and cycles and ability to develop and implement programs within budgets; ability to use public health information to improve program and business operations.

None	Aware	Knowledgeable	Proficient	Rating Average
38	67	51	19	2.29

Sixty seven staff who answered this question, rated their financial planning and management skills as “aware”, 51 “knowledgeable”, 38 “none”, and 19 “proficient”.

Table H: Leadership and Systems Thinking

Ability to foster team-building and organizational growth and development; ability to manage change and navigate operational, social and political systems to advance public health.

None	Aware	Knowledgeable	Proficient	Rating Average
21	68	57	29	2.54

Sixty eight staff who answered this question, rated their leadership and systems thinking skills as “aware”, followed by 57 “knowledgeable”, 29 “proficient”, and 12% (21) “none”.

Shows training plan and course topics and schedule for implementation.



Workforce Training Plan 2014-2019

The Workforce Training Plan seeks to address the opportunities for improvement identified in the staff survey. Ultimately, the Long Beach Department of Health and Human Services seeks to nurture a highly trained and skilled public health workforce in order to meet the dynamic and continually changing needs of the local community. The Workforce Training Plan is integrated in the Department’s Strategic Plan along with other objectives that seek to increase staff morale.

ACTION	TARGET DEADLINE
Implement a new and continuing employee orientation program for staff and managers. Management and supervisor training will emphasize the importance of using performance review to manage staff talent.	September 2015
Develop a course list of available online training for staff (focused on core competencies of public health and results of staff survey).	February 27, 2014
Develop and implement workshops related to the following topics for year 1: <ul style="list-style-type: none"> • Customer service • Effective communication • Public health sciences • Community Guide to Prevention • Integrate courses that address “top skills” identified in the survey. 	June 30, 2014
Develop and implement workshops related to the following topics for year 2: <ul style="list-style-type: none"> • Leadership and management • Financial Planning & Management Leadership and Systems Thinking • Integrate courses that address “top skills” identified in the survey. Focus on customer service. 	February 27, 2015
Develop and implement workshops related to the following topics for year 3: <ul style="list-style-type: none"> • Analytical/Assessment • Policy Development and Program Planning • Communication • Integrate courses that address “top skills” identified in the survey 	December 31, 2015
Develop and implement workshops related to the following topics for year 4: <ul style="list-style-type: none"> • Cultural competency • Community dimensions of public health 	March 2016

<ul style="list-style-type: none"> • Customer service 	
Develop and implement all core competencies workshops for year 5.	September 30, 2016
Develop calendar of workshops for 2018 and beyond.	March 31, 2017

DOCUMENT UPDATE LOG

Shows that the plan is updated annually.

Date of Update	Staff	Description of Update/Notes
December 2013	Cheryl Barrit	<ul style="list-style-type: none"> • Formatting, grammatical edits based on new Health Department Director feedback.
December 2014	Cheryl Barrit	<ul style="list-style-type: none"> • Revised training target deadlines to match organizational realities. • Administrative Officer was hired on 4/14. The date for the employee orientation program was changed from 3/14 to 9/15 to accommodate the creation of new Health Department HR policies and procedures. • Added a statement, “focus on customer service” for year 2 plan implementation. • Revised target date for year 3 training topics from July 31, 2015 to December 2015. • Work with Director on integrating workforce survey with employee satisfaction survey for the release of survey in 12/15.