

Toledo-Lucas County Health Department

Workforce Development Plan 2017-2020



This page is intentionally blank.

This page is intentionally blank.

TLCHD Workforce Development Plan

Signature Page

This plan has been approved and adopted
by the following Administrative Staff

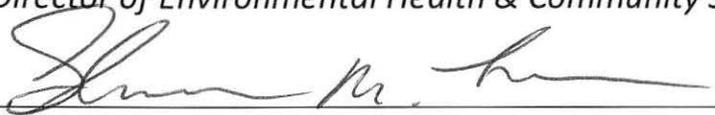
 _____ Health Commissioner	<u>08-11-17</u> Date
Vacant _____ Director of Administrative Services	_____ Date
 _____ Director of Environmental Health & Community Services	<u>8/11/2017</u> Date
 _____ Director of Health Promotion & Policy Integration	<u>8/11/17</u> Date
 _____ Director of Health Services	<u>8-11-17</u> Date
 _____ Director of Human Resources	<u>8-11-17</u> Date

Table of Contents

Introduction	2
Agency and Community Profile	2
Location and Population Served	2
Organizational Structure	3
Governance.....	3
Mission, Vision, and Core Values	4
Strategic Priorities.....	4
Learning Culture.....	5
Workforce Policies	5
Linkages to Other Plans.....	5
Workforce Profile	6
Current Workforce Demographics.....	6
Future Workforce.....	7
Core Competencies and Education Requirements	8
Agency Core Competencies	8
CE Required by Discipline.....	9
Training Needs	10
Workforce Training Needs Assessment	10
Methods.....	11
Barriers and Solutions	11
Goals, Objectives, and Implementation Plan	12
Roles & Responsibilities for Implementation	12
Training Goals and Objectives.....	13
Training Curricula and Schedule	13
Communication.....	15
Performance Evaluation & Professional Development Goals.....	15
Evaluation and Tracking	16
Resources	17
Record of Change and Review	19
Appendix A: Organizational Chart	20
Appendix B: Mean Scores	25
Appendix C: Needs Scores	27
Appendix D: Influencing Factors	29

Introduction

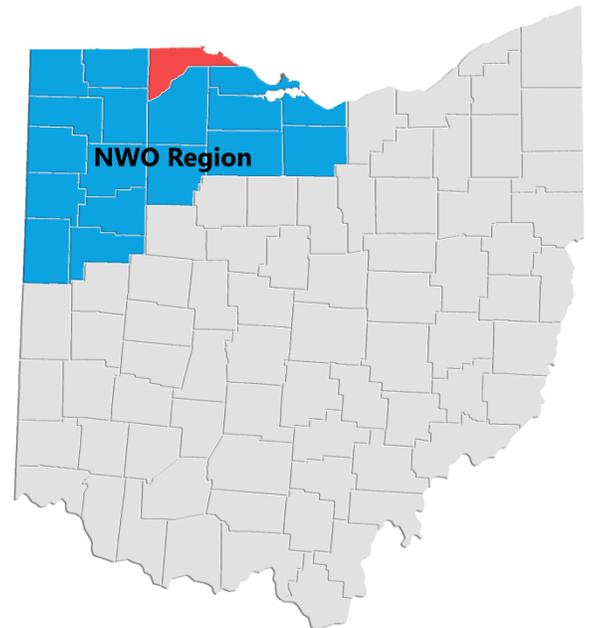
The Toledo-Lucas County Health Department (TLCHD) recognizes that training and development of the workforce is one part of a comprehensive strategy toward agency quality improvement and employee satisfaction. Identifying gaps in knowledge, skills, and abilities through the assessment of organizational and individual needs is fundamental to addressing those gaps through targeted training and development opportunities.

The 2017-2020 TLCHD Workforce Development plan provides a foundation for TLCHD's ongoing commitment to the training and development of its workforce. It also serves to address the documentation requirement associated with the Public Health Accreditation Board's (PHAB) 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.*

Agency and Community Profile

Location and Population Served

The Lucas County Regional Health District, doing business as the Toledo-Lucas County Health Department, is a combined health district serving the entire population of Lucas County in Northwest Ohio. Lucas County, located on the north-central edge of the Northwest Ohio (NWO) Region, is the sixth most populous county in the State of Ohio with 432,488¹ residents, and the largest by population of NWO's 18 counties. Lucas County shares borders with Lake Erie, Lenawee & Monroe counties in Southeastern Michigan, and Fulton, Henry, Wood, and Ottawa counties in Ohio.



Lucas County's five (5) incorporated cities (Maumee, Oregon, Sylvania, Toledo, Waterville) comprise 77.89% of the population in the county and 38.65% of the total land area. The remaining population is distributed across 6 villages (Berkey, Harbor View, Holland, Ottawa Hills, Swanton, Whitehouse) and 11 townships (Harding, Jerusalem, Monclova, Providence, Richfield, Spencer, Springfield, Swanton, Sylvania, Washington, Waterville).

¹ U.S. Census Bureau (2016). *QuickFacts* Lucas County & Cities. Retrieved from <https://www.census.gov/quickfacts/fact/table/lucascountyohio/PST045216>

Organizational Structure

The structure of the Toledo-Lucas County Health Department is available in the organizational chart in Appendix A of this plan. Appendix A will be updated annually in January.

Governance

The Toledo-Lucas County Health Department is governed by a Board of Health. Board members are appointed to represent the General Health District (townships and villages) as well as the five (5) incorporated cities within Lucas County (LC). At least one member of the TLCHD board must be a physician, and all members of the board must be residents of the area they represent.

Appointments to the Board of Health are as follows:

Appointing Authority	Appointees	Representing
DAC (General Health District)	4	All territory outside of LC's incorporated cities
Mayor of the City of Toledo	4	The incorporated area of the City of Toledo
Mayor of the City of Maumee	1	The incorporated area of the City of Maumee
Mayor of the City of Oregon	1	The incorporated area of the City of Oregon
Mayor of the City of Sylvania	1	The incorporated area of the City of Sylvania
Mayor of the City of Waterville	1	The incorporated area of the City of Waterville
TLCHD Health District Licensing Council	1	Businesses licensed by TLCHD

Appointments consist of four (4) year terms. When vacancies arise by death, resignation, or significant non-attendance, the vacated seat will be filled by the original appointing authority for the remainder of the unexpired term.

The Health Commissioner, appointed by the Board of Health, serves as the chief executive officer of the Toledo-Lucas County Health Department. The Health Commissioner is responsible for ensuring that all public health laws and mandates are upheld, and the official business of the board is completed appropriately, effectively, and efficiently.

Mission, Vision, and Core Values

TLCHD's current *Vision*, *Mission*, and *Core Values* were reviewed and revised during the 2016-2017 Strategic Planning Process, and adopted by the Board of Health in January 2017. TLCHD's *Vision* communicates our agency's highest goal and desired future state; our *Mission* defines the agency's purpose and demonstrates our efforts to be the best leaders in public health for Lucas County; our *Values* serve as guiding principles to drive the work we do through a common purpose and call to action.

Vision

A Healthier Lucas County for Everyone

Mission

The Toledo-Lucas County Health Department is committed to being the leader in public health by promoting and protecting the health of all people where they live, learn, work, and play.

Core Values

Health Promotion: We actively promote the knowledge, attitudes, and behaviors that enable our community to reach its healthiest state.

People Focused: Our primary focus is to provide the best public health for those who rely on our leadership and guidance to live happier, healthier lives.

Collaboration: We foster partnerships with key community stakeholders to enhance the delivery and effectiveness of public health information and practices.

Communication: We encourage open and clear communication within our agency and to the community in a timely, culturally appropriate, and respectful manner.

Empowerment: We empower our citizens to make healthier choices through education and a shared responsibility for the health of the public.

Disease Prevention: We actively screen, evaluate, and educate our clients through evidence-based prevention strategies to minimize the threat of disease in our community.

Strategic Priorities

In the 2017-2020 TLCHD Strategic Plan, *Workforce Development* was identified as one of eight (8) strategic priorities the Health Department should specifically focus on over the next three (3) years. Although a highly trained workforce is necessary to achieve the goals outlined under all eight (8) priorities, *Workforce Development* includes specific training goals and objectives for the continual development of staff capacity and competencies. This strategic priority has five (5) objectives, each with specific action steps, goals, and performance metrics:

1. Increase Workforce Training Opportunities at all Levels
2. Develop "Safe Feedback" system/process for staff
3. Staff Performance Effectively Managed
4. Develop and Implement an Agency Workforce Development Plan
5. Workforce Maintains & Acquires Necessary Skills for Job Excellence

Learning Culture

The Toledo-Lucas County Health Department's training philosophy is to educate, train, and empower staff to provide the best service possible to internal and external customers; supporting and maintaining a dedicated and knowledgeable workforce to advance the practice of public health in Lucas County.

This workforce development plan contributes to the overall desired culture of learning and quality/performance improvement through the identification and evaluation of training needs based on federal and state regulations and requirements; certifications needed to conduct services provided by the Board of Health; training that will increase the competency-based proficiency and knowledge of the agency's employees; and the provision of future professional advancement opportunities in public health. The agency also offers support for developing the future public health workforce through internships and medical and nursing student rotations. Training and time needed for professional development is supported to the utmost extent possible. Essential training is supported, regardless of grant/contract funding limitations. It is an employee's responsibility to maintain required professional or state licensure, and management's responsibility to verify employee credentials in accordance with the *Credentialing and Privileging Policy*. When possible, courses that provide professional development will be considered for approval based on the value they bring to the agency's mission.

Workforce Policies

Training and education reimbursement policies and procedures can be found in the *Policy & Procedure Manual* in the Human Resources Office, through the department's shared network drive, and within the employee-login section of the website.

Ohio Administrative Code (OAC) 3701-36-03 also requires that all Board of Health members must complete two hours of continuing education annually on one or more of the following topics: ethics, public health principles, or a member's responsibilities.

Linkages to Other Plans

This plan was written following the adoption of the 2017-2020 TLCHD Strategic Plan, and in conjunction with the revision of the 2017-2020 TLCHD Performance Management and Quality Improvement Plan. Included in this plan are the training goals needed to successfully carry out the Board of Health's eight (8) strategic priorities as stated in the Strategic Plan, and assure the workforce is trained in the principles of quality improvement and performance management as stated in the Performance and Quality Improvement Plan.

Workforce Profile

This section provides a description of the Toledo-Lucas County Health Department's current and anticipated future workforce needs. The table below illustrates that TLCHD's recruited staff closely reflect the demographics of the community in which we serve, helping to ensure cultural competency and understanding of our constituents.

Current Workforce Demographics

		TLCHD		Lucas County*	
		N	%	N	%
Employment Status	<i>Total # of Employees:</i>	154	100.00%	432,488	100.00%
	<i># of FTE (40 hours):</i>	118	76.62%		
	<i># of PTE (< 40 hours):</i>	36	23.38%		
Gender	<i>Female</i>	120	77.92%	222,731	51.50%
	<i>Male</i>	34	22.08%	209,757	48.50%
Ethnicity	<i>Hispanic:</i>	10	6.49%	29,842	6.90%
	<i>Non-Hispanic:</i>	144	93.51%	402,646	93.10%
Race	<i>American Indian/Alaska Native:</i>	-	-	1,730	0.40%
	<i>Asian:</i>	1	0.65%	7,352	1.70%
	<i>African American:</i>	27	17.53%	86,498	20.00%
	<i>Hawaiian:</i>	0	0.00%	432	0.10%
	<i>Caucasian:</i>	116	75.32%	323,501	74.80%
	<i>More than One Race:</i>	-	-	12,975	3.00%
	<i>Other/Not Indicated:</i>	10	6.49%	-	-
Age of Total Employees	<i>18-25:</i>	10	6.49%		
	<i>26-39:</i>	47	30.52%		
	<i>40-54:</i>	52	33.77%		
	<i>55-69:</i>	44	28.57%		
	<i>>70:</i>	1	0.65%		
Years of Service	<i><5</i>	77	50.00%		
	<i>5-9:</i>	18	11.69%		
	<i>10-14:</i>	26	16.88%		
	<i>15-19:</i>	20	12.99%		
	<i>20-24:</i>	9	5.84%		
	<i>>25:</i>	4	2.60%		
	Primary Professional Disciplines/Credentials:				**TLCHD Retirement Eligibility
				Eligible <=5 Years	Eligible Now
<i>Leadership/Administration:</i>		35	22.73%	34.29% (12)	8.57% (3)
<i>Nurse:</i>		19	12.34%	57.89% (11)	31.58% (6)
<i>Registered Sanitarian/EH Specialist:</i>		22	14.29%	13.64% (3)	-
<i>Epidemiologist:</i>		3	1.95%	33.33% (1)	33.33% (1)
<i>DIS/Health Educator:</i>		8	5.19%	12.50% (1)	-
<i>Dietician:</i>		7	4.55%	28.57% (2)	-
<i>Social Worker:</i>		1	0.65%	-	-
<i>Dentist/Medical Doctor/Nurse Practitioner:</i>		8	5.19%	25.00% (2)	12.50% (1)
<i>Bacteriologist/Pharmacist:</i>		1	0.65%	100.00% (1)	100.00% (1)
<i>Dental Hygienist:</i>		2	1.30%	50.00% (1)	50.00% (1)
<i>Clerical:</i>		39	25.32%	33.33% (13)	23.08% (9)
<i>Other:</i>		9	5.84%	33.33% (3)	11.11% (1)

**Employees eligible for full or partial retirement. List of 5 year eligibility contains current staff eligible.

*See citation on page 2 for source of county data.

Current Workforce Demographics (cont.)

Degree Type	Employee Educational Level	
	N	%
<i>HS Graduate or Equivalent</i>	11	7.19%
<i>Some College</i>	10	6.54%
<i>Technical School</i>	3	1.96%
<i>2 Year College Degree</i>	20	13.07%
<i>Bachelor's Degree</i>	63	41.18%
<i>Master's Degree</i>	40	26.14%
<i>Doctorate</i>	6	3.92%
<i>*Not Indicated</i>	1	0.65%

*Staff whose degree type has not been indicated within the PeopleSoft HR program.

Calendar Year	*Retention & Turnover Rates				
	Beginning	End	Retention Rate	Departing Staff	Turnover Rate
	N		%	N	%
2013	124	122	98.39%	12	9.68%
2014	122	144	118.03%	10	8.20%
2015	144	163	113.19%	21	14.58%
2016	163	149	91.41%	20	12.27%

*Rates calculated in accordance with <http://toolkit.ahpnet.com/Building-a-Recruitment-and-Retention-Plan/Step-1-Gather-Organizational-Baseline-Information/Gather-Organizational-Baseline-Info-Quick-Tool/How-to-Determine-Retention-Turnover-Vacancy-Rates.aspx>

Future Workforce

A strong dedication to staff development and new hire training is vital for optimal service and promotion of public health in our community. This includes having appropriate succession plans for key positions to ensure continuity of leadership and a strong workforce. Within the next 5 years, approximately one-third (50) of TLCHD's workforce will be eligible to retire. Fifteen percent (23) of the current workforce are eligible for partial or full retirement as of the writing of this plan.

The health care and public health fields are changing rapidly, especially with regards to federal policy, making it very challenging to predict what the future public health workforce will look like. TLCHD continues to monitor and embrace change, but may have limited control over how and when change occurs. Unless education requirements change in the future, the academic preparation that current staff need will likely remain unaffected. Currently, Nurses must be registered nurses (RN), Social Workers must be licensed, Sanitarians must be registered, and the Health Commissioner must hold an appropriate degree. Specific educational requirements are addressed under the *Core Competencies & Education Requirements* section and outline the legally expected educational requirements to remain in good standing with each position's accrediting boards.

Regardless of changes in the way we deliver public health, TLCHD will continue to value its highly educated and professionally credentialed employees and invest in the maintenance and improvement of staff knowledge, skills, and abilities.

Core Competencies and Education Requirements

Agency Core Competencies

The Toledo-Lucas County Health Department has adopted the *Council on Linkages Core Competencies for Public Health Professionals* (Core Competencies) as a guide for the development of its current and future workforce. The Core Competencies are a consensus set of skills for the broad practice of public health, as defined by the 10 Essential Public Health Services, and reflect desirable foundational skills for professionals engaging in the practice, education, and research of public health². Additionally, the Health Department has adopted two discipline-specific competency sets; the *Quad Council Core Competencies for Public Health Nursing* (CCPHN) and the *Council of State and Territorial Epidemiologists (CSTE) Applied Epidemiology Competencies*. All three sets are based on the same framework defined below.

The Core Competencies are categorized by eight (8) areas of practice (domains), and by three (3) tiers representing progressive levels of responsibility in the different career stages of public health professionals. The 8 Domains are as follows:

- | | |
|--|--------------------------------------|
| 1. Analytical/Assessment | 5. Community Dimensions of Practice |
| 2. Policy Development/Program Planning | 6. Public Health Sciences |
| 3. Communication | 7. Financial Planning and Management |
| 4. Cultural Competency | 8. Leadership and Systems Thinking |

Tier 1 (Front Line Staff/Entry Level): applies to public health professionals who carry out the day-to-day tasks of public health organizations and are not in management positions. Responsibilities of these professionals may include data collection and analysis, fieldwork, program planning, outreach, communications, customer service, and program support.

Tier 2 (Program Management/Supervisory Level): applies to public health professionals in program management or supervisory roles. Responsibilities of these professionals may include developing, implementing, and evaluating programs, supervising staff, establishing and maintaining community partnerships, managing timelines and work plans, making policy recommendations, and providing technical expertise.

Tier 3 (Senior Management/Executive Level): applies to public health professionals at a senior management level and to leaders of public health organizations. These professionals typically have staff who report to them and may be responsible for overseeing major programs or operations of the organization, setting a strategy and vision for the organization, creating a culture of quality within the organization, and working with the community to improve health.

² http://www.phf.org/resourcestools/pages/core_public_health_competencies.aspx

CE Required by Discipline

Licensures held by staff, and their associated Continuing Education (CE) requirements as of August 2017 are shown below:

Discipline	CE Hours	Renewal Period	Distribution of Total CE Hours
Physician	100 hours	2 years	40 hours must be earned in category 1, although all hours may be earned in category 1. Additional hours in category 2 cannot be substituted for category 1.
Registered Nurses	24 hours	2 years	At least 1 of the hours must be related to chapter 4723 of the Ohio nurse practice codes & rules.
Licensed Practical Nurse	24 hours	2 years	At least 1 of the hours must be related to chapter 4723 of the Ohio nurse practice codes & rules.
Certified Medical Assistant	12 hours	Annually	
Registered Dietitian	75 hours	5 years	
Certified Nurse Practitioner	75 hours	2 years	
Doctor of Dental Surgery	40 hours	2 years	
Doctor of Optometry	25 hours	Annually	
Certified Nurse-Midwife	24 hours	2 years	Must also meet all requirements for national certification
Registered Dental Hygienist	24 hours	2 years	
Licensed Social Worker	30 hours	2 years	3 of the hours must cover ethics.
Certified Clinical Medical Assistant	12 hours	Annually	
Pharmacist	60 hours	3 years	Minimum of 2 hours medication errors/patient safety (ACPE-05) and minimum 3 hours (ACPE-03) law or board pharmacy approved.
Medical Technician	12 hours	Annually	
Community Health Worker	15 hours	Annually	At least one of the 15 contact hours must be directly related to establishing and maintain professional boundaries and one of the 15 contact hours must be Category A.
Registered Sanitarian / Sanitarian-In-Training	18 hours	Annually	Refer to OAC 4736-11-03 for CE requirements for renewal.
Board of Health Member	2 hours	Annually	Each CE shall pertain to one or more of the following topics: ethics, public health principles, or a member's responsibility.

Continuing Education (CE): CE is a learning activity that builds upon a pre-licensure or pre-certification education program and enables a licensed or certificated individual to acquire or improve knowledge or skills that promote professional or technical development to enhance the individual's contribution to quality health care and pursuit of health care career goals.

Category: Category is a CE directly related to the licensed or certificated individual's practice and the administrative rules of their respective Ohio Board.

Training Needs

This section provides an overview of TLCHD's required and identified training needs, a workforce needs assessment, and a description of the barriers/inhibitors preventing the closure of identified gaps.

Workforce Training Needs Assessment

A Workforce Training Needs Assessment (WTNA) was conducted between February 22 and May 3, 2016. The assessment was based on the *Council on Linkages Core Competencies for Public Health Professionals* (COL), the *Quad Council Core Competencies for Public Health Nursing* (CCPHN), and the *CSTE Applied Epidemiology Competencies* (AEC). Refer to the *Agency Core Competencies* section for more information on these competency sets. Both the CCPHN and AEC competencies are based on the COL framework's eight (8) domains of practice with three (3) tiers or practice per domain.

The survey included two (2) self-reported measures: 1) importance/relevance to job, and 2) personal ability. These self-reported assessment measures were collected across each of the eight (8) competency categories. TLCHD also assessed a ninth competency domain: *Informatics Competencies for Public Health Professionals*- designed by the Northwest Center for Public Health Practice (August 2002) to supplement the general skills in the COL competency set. The competency categories (domains) were the same for all three competency sets and only differed in the number of competencies by tier level. Response distribution across competency sets and tiers were as follows:

Competency Set	Tier 1	Tier 2	Tier 3/3a	Tier 3b
COL	70	22	3	N/a
CCPHN	18	-	-	N/a
AEC	-	2	-	1

This table represents the maximum possible N for each competency set and tier level. See Methods section for explanation of data included in the analysis of the Workforce Training Needs Assessment.*At the time the survey was conducted, TLCHD had 159 staff.

Overall, 72.96% of staff (116/159*) responded to the WTNA.

Board of Health Assessment

In March, 2017, Board of Health members were asked to complete a self-assessment regarding potential areas of improvement including aspects of communication with department leadership and staff, information provided at board meetings, knowledge of BOH by-laws and responsibilities, and preferences for continuing education. More than half of sitting board members completed the self-assessment (55.56% or 5/9). This assessment was conducted as part of a larger state-wide Quality Improvement project organized in 2017 by the accreditation coordinators from the Delaware General Health District and Franklin County Public Health. BOH members indicated topics of training interest including: *how an FQHC and Health Board work together, infant mortality, opiates, obesity,*

diversity in departments at all levels, human resources and legal issues, general population/public health issues, and all programs offered by the health department.

Methods

Competency Set and Tier Selection: staff self-designated their competency set by indicating if they were a nurse, an epidemiologist, or in another public health position. Tier level was similarly selected before being directed to the appropriate competencies for each position type.

Need Score: respondent overall mean scores (**Appendix B**) are reported for each of the nine competency domains, as well as by tier level for both self-reported assessment criteria: 1) importance/relevance to job, 2) personal ability. A need score was calculated for each skill as the "ability score" minus the "importance/relevance score." This means that each need score could range from -3 to +3, with a negative score indicating a possible need for training. The percentage of staff whose responses resulted in a negative score (**Appendix C**) is also reported by competency domain and tier level (tier reporting is aggregated across competency sets). Not every respondent answered every question, and some respondents only answered one of the two self-reported criteria for particular measures. All reported mean data, and percentage of negative score data is only reported for competencies where both assessment criteria were answered, and a need score was possible to generate.

Influencing Factors: respondents were additionally asked to rate their levels of motivation related to training, barriers for participation in training, and preferred course type and delivery methods. This information is reported by indicating the percentage of respondents that agreed or strongly agreed to a particular measure (**Appendix D**).

Barriers and Solutions

Nearly two-thirds (75/116) of staff responding to the Workforce Training Needs Assessment indicated that *agency budget restrictions* were a "barrier" or "very much a barrier" to participating in training. Nearly half of staff indicated that *individual cost* (59/116), *desired topics not available* (54/116), and *family commitments* (54/116) were also significant barriers to participation in training. Both *time away from work* and *travel* were also indicated as barriers by 43.10% (50) and 41.38% (48) of staff respectively. Staff commented that compensation for travel time (to and from trainings), time away from work (including appropriate coverage for job duties), and available training topics not always relating to their duties posed additional barriers.

Providing online training resources, and trainings at all-staff meetings will help to reduce some of the barriers identified above. Continued leadership support for staff training opportunities, staff membership in professional organizations, and budgetary allocation for training where possible will also help reduce these barriers. Whenever possible, free trainings will be made available and communicated to staff.

Goals, Objectives, and Implementation Plan

This section provides information regarding TLCHD training goals and objectives of the agency as well as resources, roles, and responsibilities related to the implementation of the plan. The goals and objectives outlined are for a three-year time period and will be updated on an annual basis as needed.

Roles & Responsibilities for Implementation

Who	Roles & Responsibilities
Health Commissioner	Responsible to the Board of Health for workforce strategy, priority setting, establishment of goals and objectives, and establishing an environment that is conducive and supportive of learning.
Human Resources	Provide guidance to the Health Commissioner regarding workforce development and assist in creating a culture that is conducive and supportive of learning. Works with Directors to find appropriate training/development opportunities for staff. Provide guidance to the Directors with coaching, mentoring and succession planning. Responsible for informing supervisors of workforce development needs, plans, and issues.
Division Directors	Responsible to the Health Commissioner for all employees within their respective divisions. Support, coach, and mentor supervisors and/or employees to assure that appropriate training resources and support structures are available within the division. Responsible for ensuring all staff complete mandatory trainings as required.
Supervisors	Responsible to their respective Director and employees to ensure that individual and agency-based training initiatives are implemented. Works with employee to develop an individualized learning plan and supports the implementation of the plan (i.e. time away from work, coaching, opportunities for advancement, tuition reimbursement).
All Employees	Ultimately responsible for their own learning and development. Work with supervisor to identify and engage in training and development opportunities that meet their individual as well as agency-based needs. Identify opportunities to apply new learning on the job.

Training Goals and Objectives

Goal		Objective(s)	Timeline	Responsible Parties
1	Promote workforce competence to perform essential public services in all areas of public health practice	<ul style="list-style-type: none"> Staff understand Core Competencies for Public Health Professionals 	By Dec 2018	Senior Leadership & Supervisors
2	Develop and Implement Consistent and Inclusive Hiring & Onboarding Process	<ul style="list-style-type: none"> Standardize interview process Review and revise onboarding procedures 	By June 2018	Human Resources, Onboarding Process Committee (OPC)
3	Develop a Culture of Quality within TLCHD	<ul style="list-style-type: none"> Staff understand and embrace QI principles and practices Staff participate in QI initiatives 	Ongoing	Quality Assurance Coordinator, Senior Leadership & Supervisors
4	Create and implement a leadership succession process and plan	<ul style="list-style-type: none"> Identify key leadership criteria and competencies needed by potential successor Develop and implement leadership succession plan 	By June 2018	Senior Leadership, Human Resources
5	Establish Employee Professional Development Plans	<ul style="list-style-type: none"> Establish employee professional development plan Link plans to performance evaluations 	By Dec 2019	Senior Leadership, Supervisors, Human Resources
6	Provide or Promote Appropriate Development Opportunities for Board of Health Members	<ul style="list-style-type: none"> BOH members understand role of Public Health in Lucas County, 	Ongoing	Senior Leadership, BOH President
7	Expand and promote Cultural Competence	<ul style="list-style-type: none"> Quarterly trainings for staff in cultural competency Positive interactions with diverse populations 	Ongoing	Supervisor of Community & Minority Health, & Senior Leadership
8	Implement annual Safety and Emergency Training	<ul style="list-style-type: none"> Annual training for all staff regarding ICS, Safety Protocols, and other Safety/Emergency topics. 	By Dec 2017	Emergency Preparedness Coordinator, Senior Leadership
9	Develop Supervisor Training Tool Kit and Curriculum	<ul style="list-style-type: none"> Supervisors trained in all aspects of managing public health professionals Supervisor Handbook 	By Aug 2018	Senior Leadership, Human Resources

Training Curricula and Schedule

This section describes the recommended curricula and training schedule for the Toledo-Lucas County Health Department. All of the below courses will occur during regular work hours and staff will be expected to participate in all of the below per the recommended frequency.

Training	Description / Objectives	Target Audience	Schedule
^{SP} Employee Orientation	<ul style="list-style-type: none"> Become familiar with applicable agency rules, policies, and practices Understand how the agency operates 	All Staff	Upon Hire
Public Health 101 (incl. PHAB)	<ul style="list-style-type: none"> Understand the structure, function, and operations of Ohio Health Districts Relate emerging challenges in public health 	All Staff	Upon Hire
HIPAA	<ul style="list-style-type: none"> Identify circumstances in which sharing patient data without consent is appropriate or inappropriate 	All Staff	Annually
^{QI} CQI for Public Health: The Fundamentals	<ul style="list-style-type: none"> Promote a culture of Quality Improvement Instill the basic principles of QI in all staff 	All Staff	Upon Hire & Refresher Course Every 2 years
^{QI} CQI for Public Health: Tool Time	<ul style="list-style-type: none"> Promote QI Council confidence and expertise in project facilitation 	QI Council Members	Upon Joining QI Council

Training Curricula and Schedule (cont.)

Training	Description / Objectives	Target Audience	Schedule
IS-100 (Introduction to Incident Command System)	<ul style="list-style-type: none"> Demonstrate knowledge about the history, features and principles, and organizational structure of the Incident Command System 	All Staff	Upon Hire
IS-200 (ICS for Single Resources and Initial Action Incidents)	<ul style="list-style-type: none"> Demonstrate knowledge about the history, features and principles, and organizational structure of the Incident Command System 	All Staff	Upon Hire
IS-700 (National Incident Management System)	<ul style="list-style-type: none"> Describe the intent of NIMS Describe the key concepts and principles underlying NIMS 	All Staff	Upon Hire
IS-800 (National Response Framework)	<ul style="list-style-type: none"> Introduction to the concepts and principles of the National Response Framework 	All Staff	Upon Hire
^{QI} Performance Management Training	<ul style="list-style-type: none"> Engage staff at all levels in performance management and data based decision making 	All Staff	One-Time
^{SP} Cultural Competency Training	<ul style="list-style-type: none"> Relate importance of cultural competency in public health practice. Provide understanding of cultural differences and how they affect staff and stakeholder interactions 	All Staff	Annual Cultural Competence Training & One-time completion of each of the listed courses for all staff
Dialogue for Change			
Bridges out of Poverty			
C.O.P.E. Training			
^{SP} Naloxone Administration	<ul style="list-style-type: none"> To provide staff with the training, knowledge, standing orders, and ability 	All Staff	One-Time
Mental Health First Aid	<ul style="list-style-type: none"> Develop skills to help someone who may be developing a mental health problem or facing a mental health crisis. 	All Staff	One-Time
Ohio Train	<ul style="list-style-type: none"> Demonstrate how to locate training courses on OhioTrain Demonstrate effective use of OhioTrain's course management tools 	All Staff	Upon Hire & As Needed
Customer Service	<ul style="list-style-type: none"> Provide continuously excellent customer service 	All Staff	Annually
CPR Training	<ul style="list-style-type: none"> Understand basic life support (BLS) principles and actions 	All Staff	Biennially
Bloodborne Pathogens	<ul style="list-style-type: none"> Recognize activities that may involve exposure to blood and other potentially infectious materials Understand actions to take and persons to contact in an emergency 	All Staff	Annually
Equal Employment Opportunity Training		Directors / Supervisors	One-Time
Ohio Civil Rights Commission Training		Directors / Supervisors	One-Time
Conflict Resolution Training	<ul style="list-style-type: none"> Learn which of the 5 response styles to conflict situations is your preferred way of handling conflict, and how to utilize it more effectively 	Directors / Supervisors	One-Time
^{NA} Microsoft Office Training	<ul style="list-style-type: none"> Develop or improve understanding and skills with Microsoft Office Suite 	As Needed	As Needed
^{NA} Statistical Software Training	<ul style="list-style-type: none"> Promote understanding and skills in using statistical software for data analysis 	Epidemiologists	As Needed

*SP superscript indicates alignment with Strategic Plan; QI superscript indicates alignment with the Performance and Quality Improvement Plan. NA superscript indicates results or staff requests from the Needs Assessment.

In addition to completing mandated trainings, TLCHD employees are strongly encouraged to take additional training in order to address training/knowledge gaps identified in their competency assessment and/or professional interests.

Communication

Training opportunities will be shared with employees through agency email, individual mailboxes, monthly staff meetings, and posted in copy rooms. A hard copy of this plan will be maintained in the Human Resources Office. Electronic copies will be located on shared network drive and the employee login section of the website.

Performance Evaluation & Professional Development Goals

Employees will receive a full performance evaluation annually based on the month of their anniversary date of hire. In addition to rating staff on *General Performance Factors*, supervisors are expected to work with each employee to establish professional goals to achieve in the upcoming year. All established goals should be within the employee's capability to achieve. Goals should be established to correct performance deficiencies, to prepare an employee for changing responsibilities, as part of a leadership succession/continuity plan, or to improve the employee's ability to provide excellent public health service. If a goal spans multiple years, incremental measures of success will be defined for the employee's professional development plan.

Evaluation and Tracking

Introduction

Evaluation of training will provide the Toledo-Lucas County Health department with useful feedback regarding its training efforts. Evaluation criteria will look at content, delivery, vendor preferences, and training effectiveness. Accurate evaluation tracking is necessary, particularly for professional continuing education documentation and quality improvement purposes. This section describes how evaluation and tracking of training will be conducted.

Evaluation

Staff trainings presented at the Toledo-Lucas County Health Department are often concluded with a participant evaluation survey. Results of these surveys serve as guidance on what may improve the content of future in-services. Pre-and-Post tests may also be used to determine increase in participant knowledge. Whenever possible, training effectiveness will be determined by measuring change in an employee's behavior and whether it has translated into tangible benefits for the Health Department.

Tracking

Accurate tracking is essential to ensure TLCHD staff are maintaining professional licensure, certifications, and/or registrations, and for the monitoring of training goals in this and other agency plans. Training shall be tracked by the Health Department's administration. Employees must submit a copy of any training certificate or attendance document to their supervisor (electronic or hard copy) to be placed in the employee's personnel file. Additionally, employees may use OhioTrain as a resource for completing and tracking training. Located at <http://oh.train.org>, the system has the ability to create and maintain personal learning records, perform course searches, and provide the ability to register for courses online. Continuing education certificates and certificates of attendance provided to participants can be used to confirm and track completion during annual performance reviews.

Plan Review

The 2017-2020 TLCHD Workforce Development Plan will be reviewed annually by the Division Directors and staff. This review will include any updates to the agency/workforce profile, progress towards the achievement of workforce development goals, and any newly identified training needs. A progress report will be submitted to the Board of Health after the review and any updates have been completed.

Every three (3) years a full workforce training needs assessment will be conducted prior to the full revision of the Workforce Development Plan.

Resources

The following table lists resources including local, regional, state, and national associations that provide access to continuing education opportunities and workforce development-related resources. The list is in alphabetical order and is non-exhaustive.

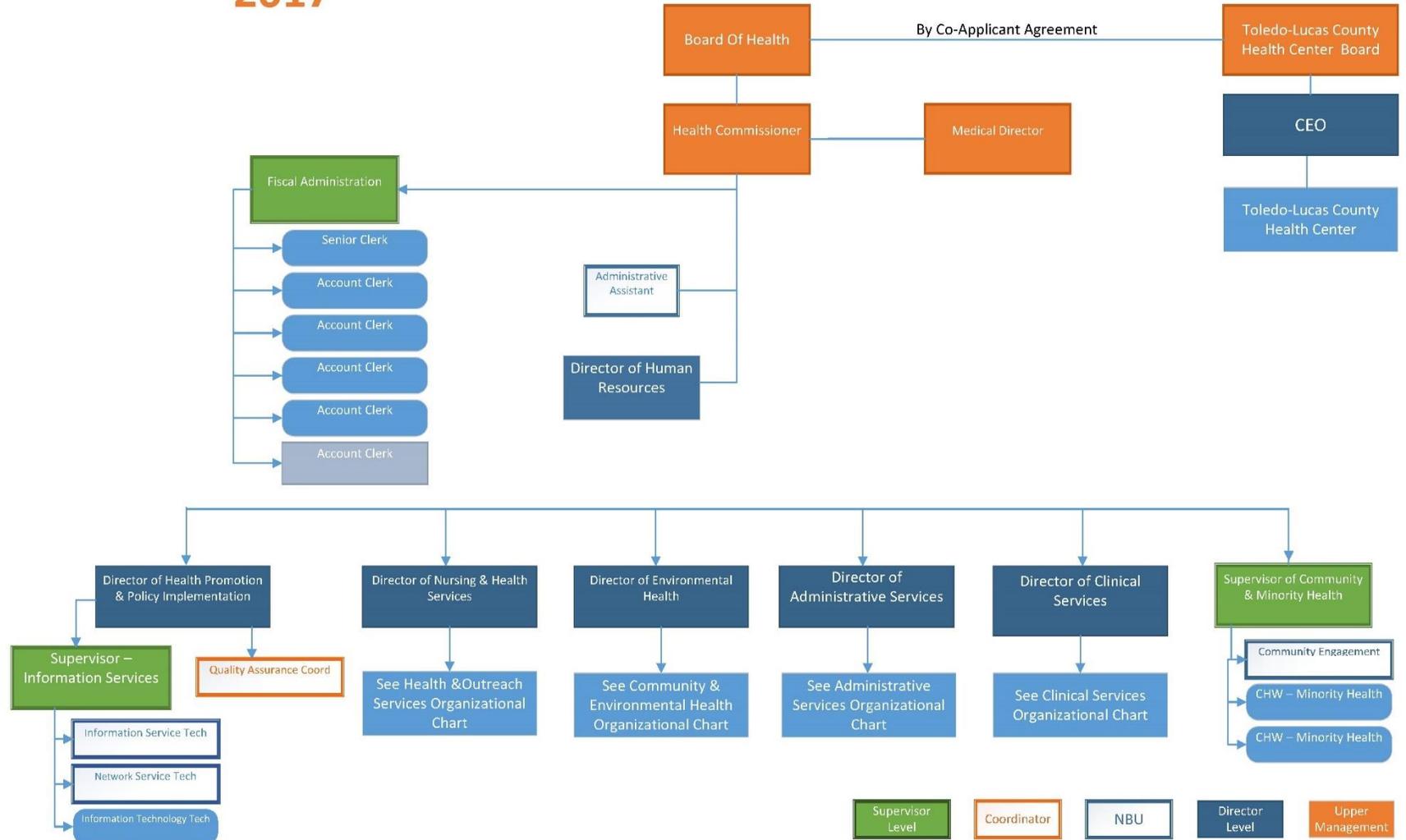
Resource	Location and Description
American Congress of Obstetricians and Gynecologist (ACOG)	http://www.acog.org : provides continuing education of its members, promotes patient education, and increases awareness among its members and the public of the changing issues facing women's health care
American Dental Association (ADA)	http://www.ada.org : supports a growing number of continuing education initiatives to keep members on top of the latest tools, treatment methods, scientific research and business practices
American Health Information Management Association (AHIMA)	http://www.ahima.org : is committed to lifelong learning. Provides an array of offerings for HIM professionals.
Area Health Education Centers (AHEC)	http://www.ohioahec.net/intEducation.html : list of regional AHEC sites across Ohio and training opportunities; current focus is primarily health literacy and health communications
American Association of Advanced Practice Nurses (OAAPN)	http://www.aaapn.org : offers many fact sheets, tip cards and Toolkits to help guide working with patients and colleagues. Topics cover a vast range from dealing with bullying and workplace violence to what you need to know about social networking for nurses
American Association of Nurse Practitioners (AANP)	http://www.aanp.org : provides tools and resources needed for professional growth and fulfilment.
Association of Ohio Health Commissioners (AOHC)	http://www.aohc.net/displaycommon.cfm?an=4 : offers conferences, health commissioner, and leader training
Association of Schools of Public Health (ASPH)	http://www.aspph.org/educate/research-training-centers/ : provides competency to curriculum toolkit to help an agency link core competencies to training objectives/plan
Association of State and Territorial Health Officers (ASTHO)	http://www.astho.org/programs/Workforce-and-Leadership-Development/ : supports workforce and leadership development efforts that result in strong, well-staffed public health agencies
The Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN)	http://www.awhonn.org : Provides numerous continuing nursing education opportunities and resources
Centers for Disease Control and Prevention (CDC)	http://www.cdc.gov/Learning/ : online programs and toolkits for public health issues; links to domestic and international public health training programs
The Council on Linkages Between Academia and Public Health Practice- Core Competencies for PH Professionals (COL -PHP)	http://www.phf.org/resourcestools/.../core_public_health_competencies.aspx : the Core Competencies are designed to serve as a starting point to meet training and workforce needs
Federal Emergency Management Agency (FEMA)	http://training.fema.gov/ : training opportunities to prepare professionals and non-professionals to address the many forms of domestic emergencies; NIMS training plan: http://www.fema.gov/emergency/nims/index.shtm
HomeCare Institute	http://www.homecareinstitute.com : a subscription-based LearnCenter Portal with a curriculum of Internet-based home care and hospice computer-based education courses housed within a comprehensive Learning Management System
John Glenn School of Public Affairs	http://glennschool.osu.edu/training/training.html : MAPS (Management Advancement for the Public Service) training for professionals at all levels in the public and nonprofit sectors
Kirkpatrick Evaluation Model	http://www.kirkpatrickpartners.com/ : training evaluation - related resources
Licensing Boards	Information regarding specific licensures and continuing education requirements can be found on individual licensing board websites; several provide access to continuing education opportunities
Maumee Valley Dental Association	http://www.nonprofitfacts.com/OH/Ohio-Dental-Association-Maumee-Valley-Dental-Society.html : provides regional networking and educational opportunities for members
Midwest Care Alliance (MCA)	http://www.midwestcarealliance.org/aws/MCA/pt/sd/calendar/22249/_PARENT/layout_details/false : provides a variety of comprehensive online tools & resources to meet Medicare Conditions of Participation requirements
National Association of Local Boards of Health (NALBOH)	http://www.nalboh.org/ : An organization committed to strengthening and empowering boards of health through education and training

2017-2020 TLCHD Workforce Development Plan

Resource	Location and Description
National Association of County and City Health Officials (NACCHO)	http://www.naccho.org/topics/workforce/ : offers a variety of workshops and trainings, supports leadership development and core competency efforts to address pressing public health workforce issues
National Association of Nurse Practitioners in Women's Health (NPWH)	http://www.npwh.org/ : is used as a source of information on nurse practitioner education, practice, and women's health issues
National Environmental Health Association (NEHA) Ohio Environmental Health Association (OEHA)	http://www.neha.org/CEweb/CE.asp : environmental health-related training opportunities and resources http://www.ohioeha.org/
National Hospice and Palliative Care Organization (NHPCO)	http://www.nhpco.org/ : develops public and professional educational programs and materials to enhance understanding and availability of hospice and palliative care; convenes frequent meetings and symposia on emerging issues; provides technical informational resources
Ohio Council for Home Care (OCHCH)	http://www.ochch.org/ : provides educational opportunities while earning CE credits for home care and hospice professionals
Ohio Dental Association (ODA)	http://www.oda.org/ : is a leader in providing professional information and education to dentists and the dental team
Ohio Emergency Management Agency (OEMA)	http://ema.ohio.gov/training.aspx : emergency response-related training opportunities offered in Columbus at the State Emergency Operations Center or around the state at local training facilities
Ohio Nurses Association (ONA)	http://www.ohnurses.org/AM/Template.cfm?Section=Earn_Contact_Hours&Template=/TaggedPage/TaggedPageDisplay.cfm&TPLID=45&ContentID=5927 : continuing education opportunities for nurses
Ohio Public Health Association (OPHA)	http://www.ohiopa.org/ : annual public health combined conference as well as various conferences/events
Ohio Public Health Training Center, OSU College of Public Health Center for Public Health Practice	https://cph.osu.edu/practice : live and online competency-based training opportunities and other developmental resources for public health practitioners; Learning Content Management System can be accessed here: https://osupublichealth.catalog.instructure.com/
Public Entities Pool of Ohio (PEP)	http://www.pepohio.org/ : provides access to hundreds of training videos and DVDs for members
Public Health Foundation (PHF)	http://www.phf.org/focusareas/workforcedevelopment/pages/default.aspx ; Array of services, resources, and programs that public health practitioners and academics can use to strengthen the workforce
Public Health Training Center Network (PHTC)	http://www.phtc-online.org/ : network of 37 public health training centers (including Ohio PHTC); various continuing education offerings
Sigma Theta Tau International Honor Society of Nurses	http://www.nursingsociety.org/ : provides numerous professional development products and services that focus on the core areas of education, leadership, career development, evidence-based nursing, research and scholarship
Society for Human Resource Management (SHRM)	http://www.shrm.org/ : serves the needs of HR professionals and advances the interests of the HR profession
Society for Public Health Education (SOPHE) Ohio SOPHE	http://www.sophe.org/ : SOPHE, including its chapters, is a designated multiple event provider of CE by the National Commission for Health Education Credentialing http://www.ohiosophe.org/
South Central Public Health Training Center	http://r6phtc.sph.tulane.edu/online-courses/ : Training topic areas center on competency-based, practice-focused courses addressing core functions and essential services. The Region 6 South Central Public Health Training Center partners with various agencies and organizations to achieve a comprehensive regional approach to workforce development.
Studer Group	http://www.studergroup.com : provides training and resources for organizations to help them to create an aligned, energized and empowered workforce focused on providing the highest levels of quality care
Toledo Dental Association	http://www.toledodentalsociety.com/ : promote public health and welfare, and advance the dental profession through research, education, legislation and mutual cooperation among members.
TRAIN & OhioTrain	http://www.train.org : public health-related continuing education opportunities offered by affiliates from across the country, including Ohio: www.ohiotrain.org
US Office of Personnel Management	http://www.feddesk.com/freehandbooks/1059.pdf : provides a guide called Strategically Planning Training and Measuring Results

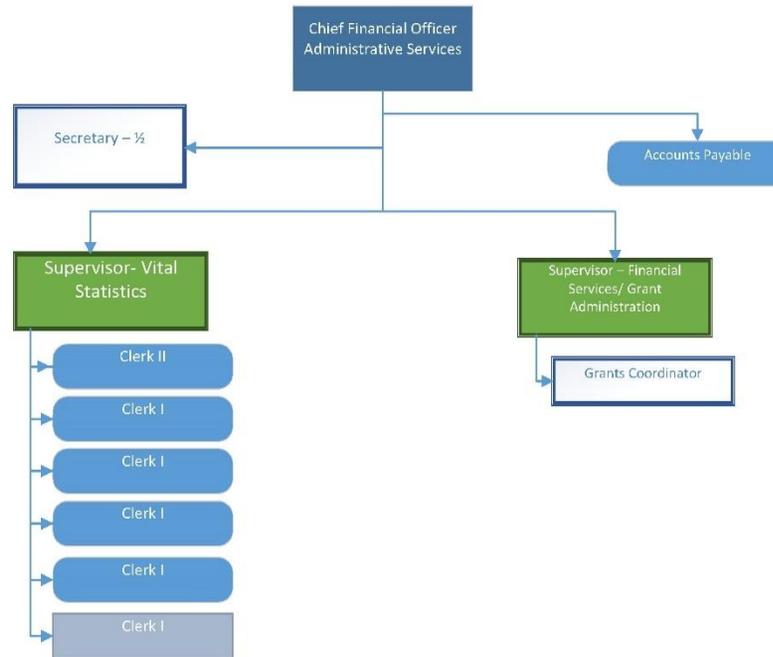
Appendix A: Organizational Chart

Toledo-Lucas County Health Department Organizational Chart 2017



Updated: 8-2-17

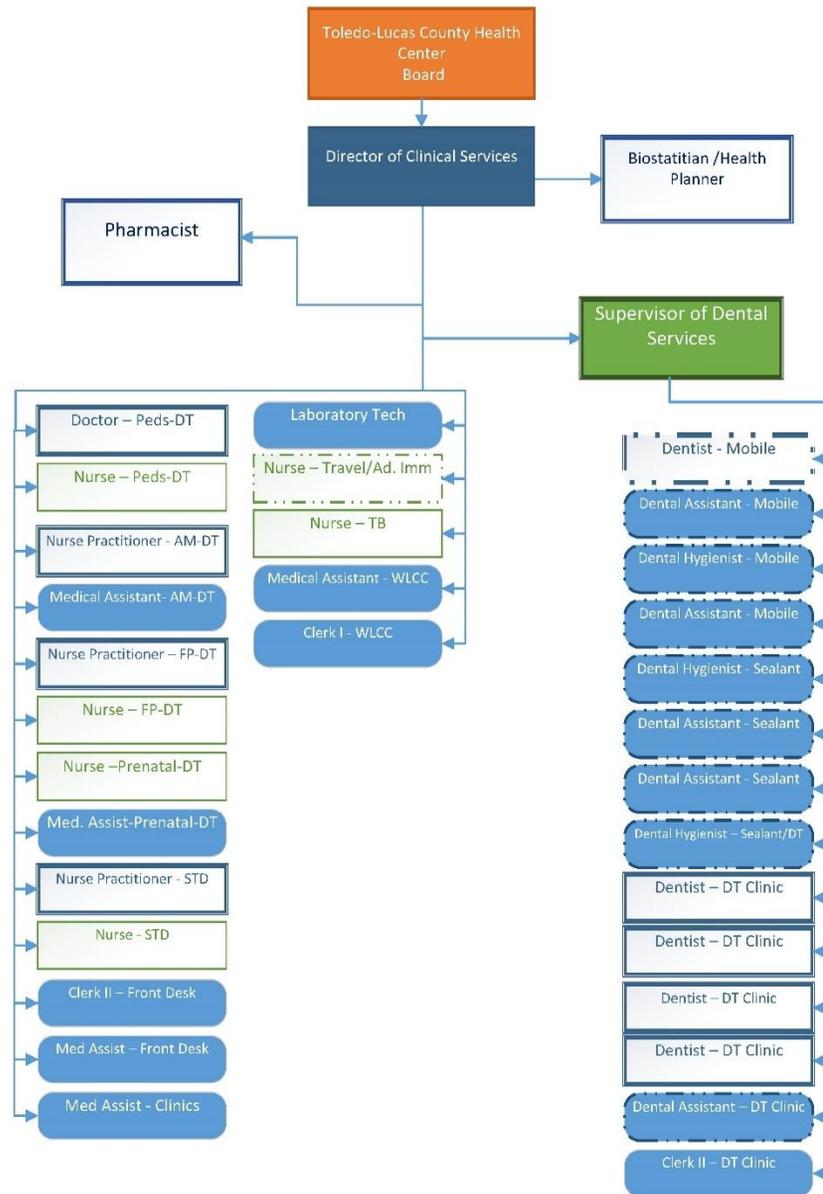
Administrative Services Organizational Chart 2017



Updated: 8-2-17



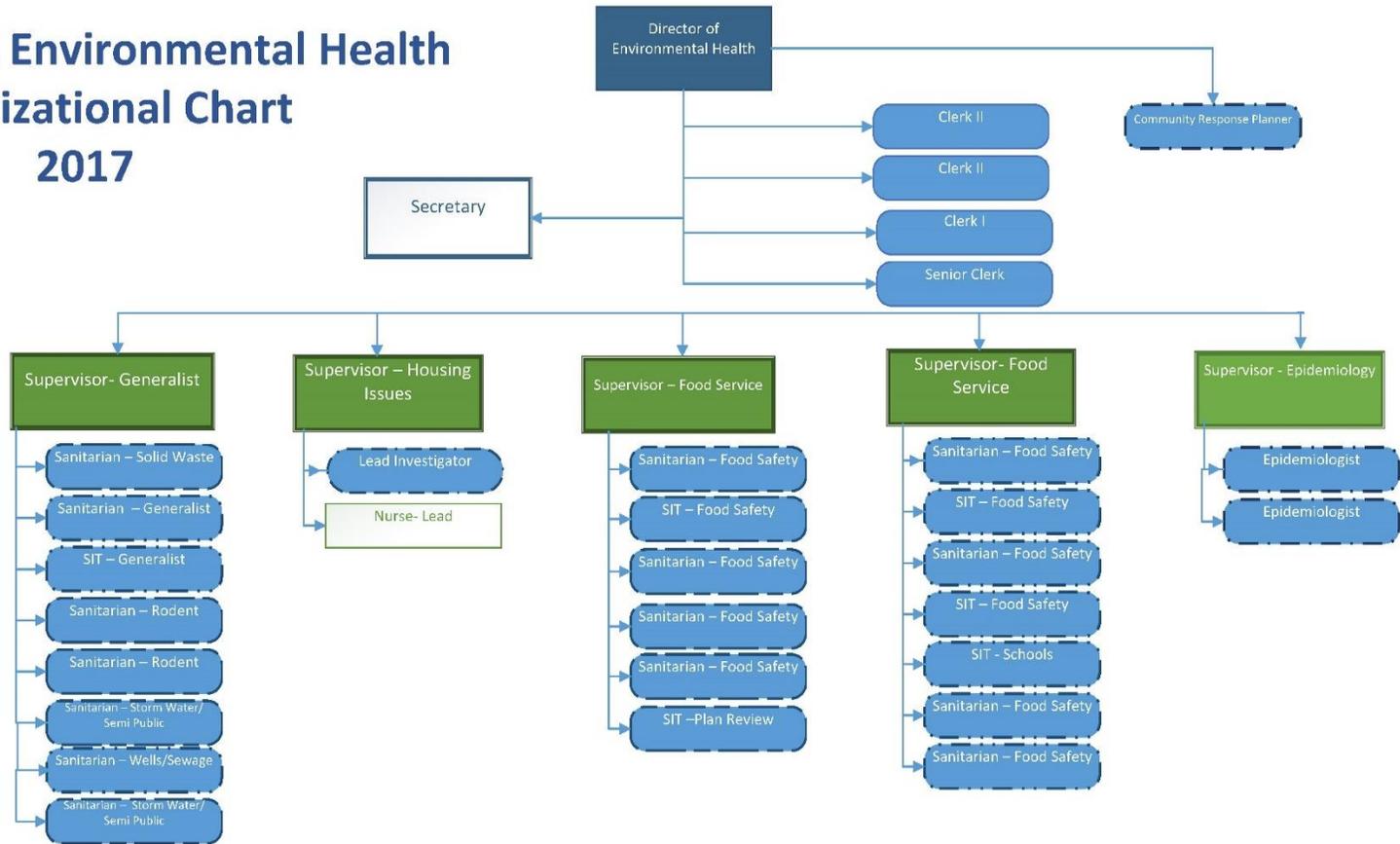
Clinical Services Organizational Chart 2017



Updated: 8-2-17



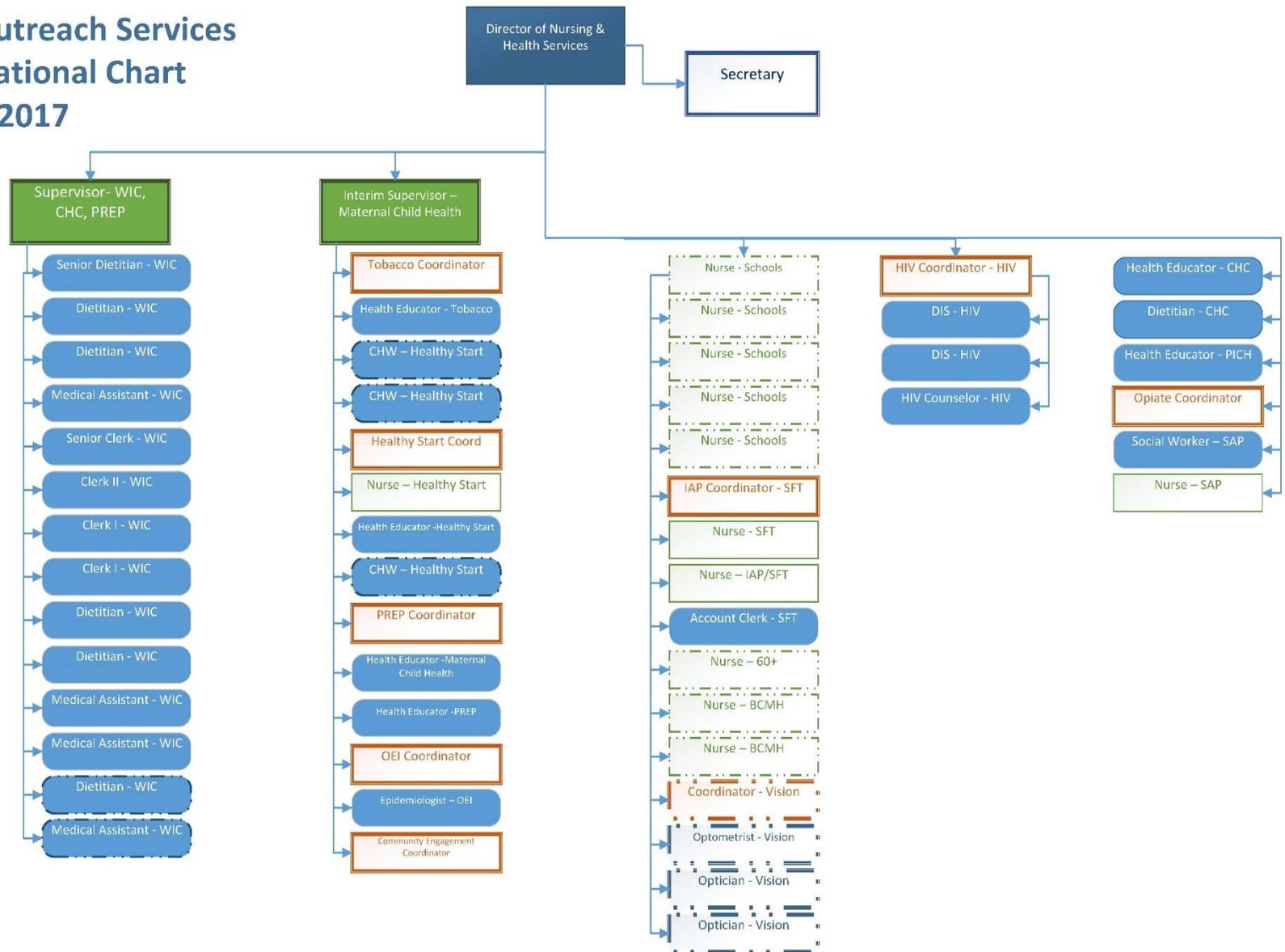
Community & Environmental Health Organizational Chart 2017



Updated 8-2-17



Health & Outreach Services Organizational Chart 2017

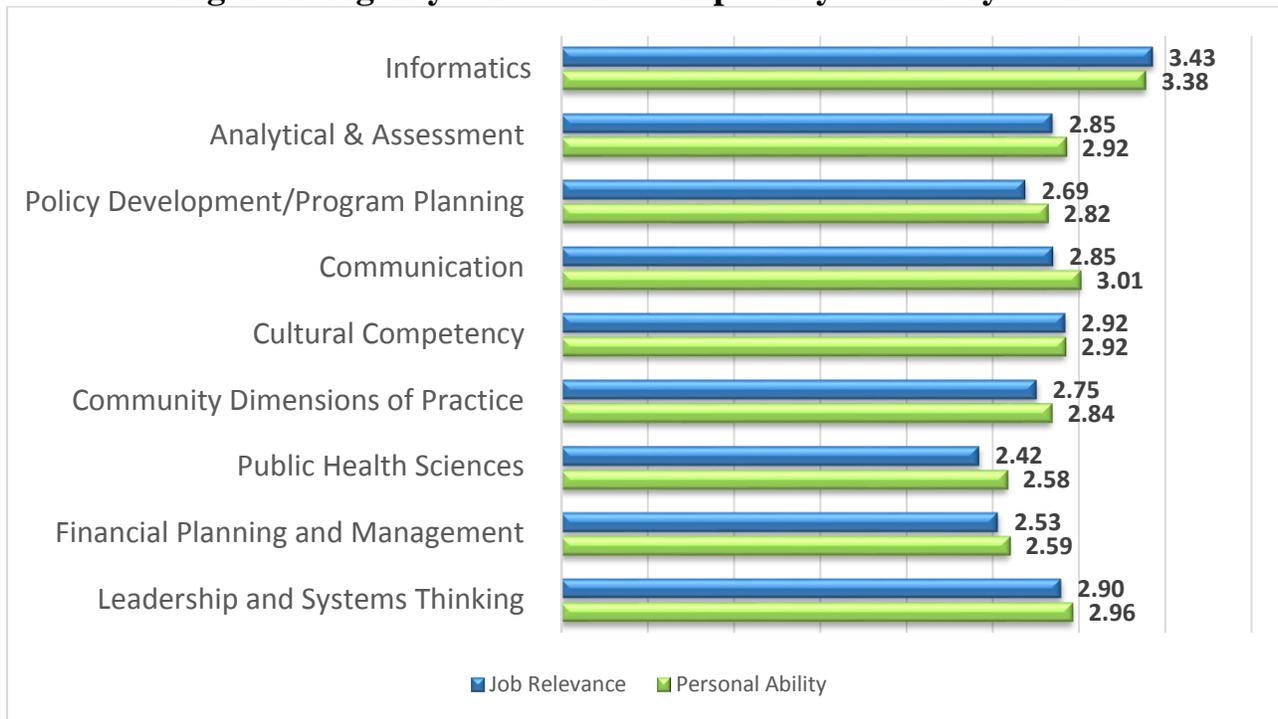


Updated:8-2-17

Cardinal Staffing	XORA	AFSCME	NBU	Nurses - ONA	Coordinator	Director Level	Supervisor Level
-------------------	------	--------	-----	--------------	-------------	----------------	------------------

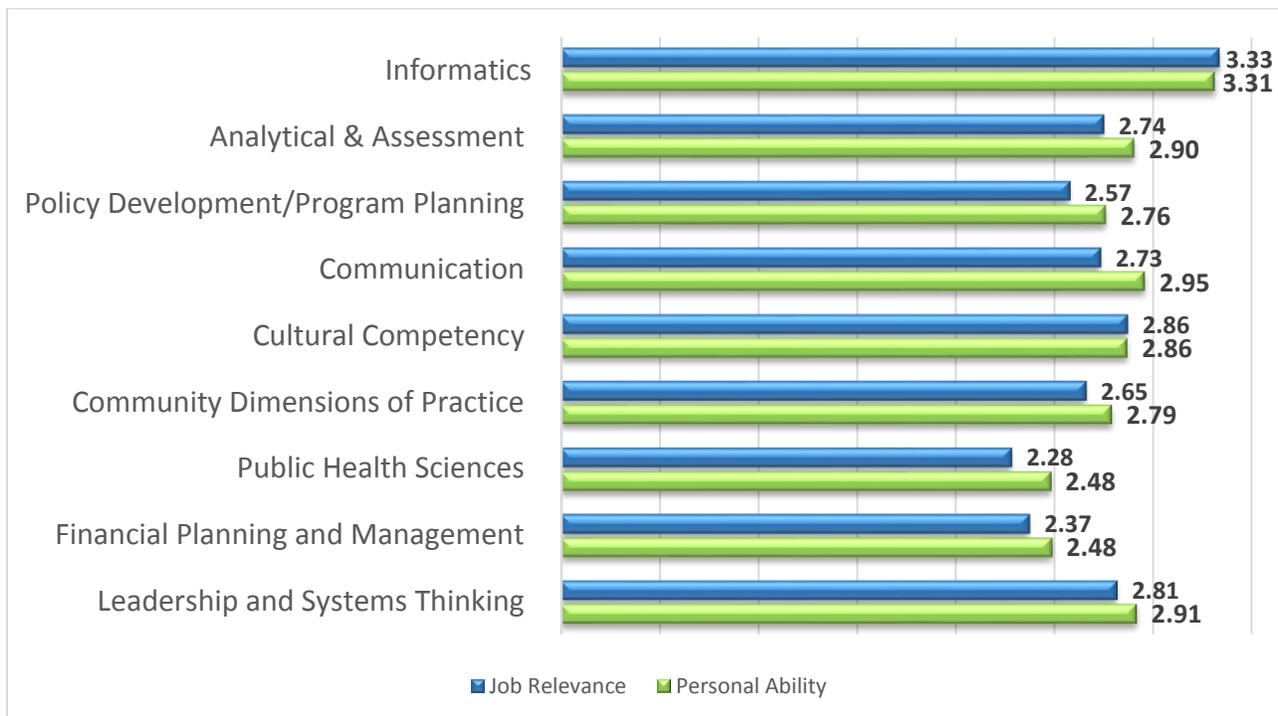
Appendix B: Mean Scores

Figure 1: Agency Wide Core Competency Summary Scores



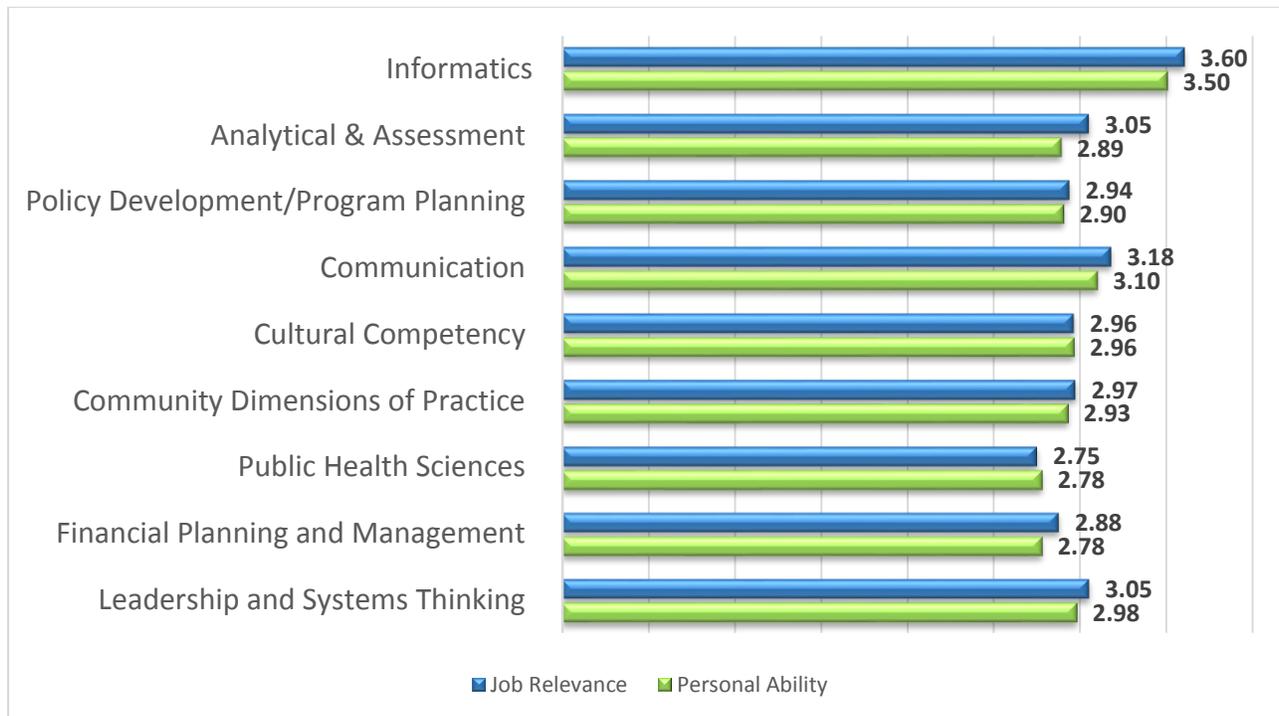
1 being low to 4 being high

Figure 1.1: Tier 1 Core Competency Summary Scores



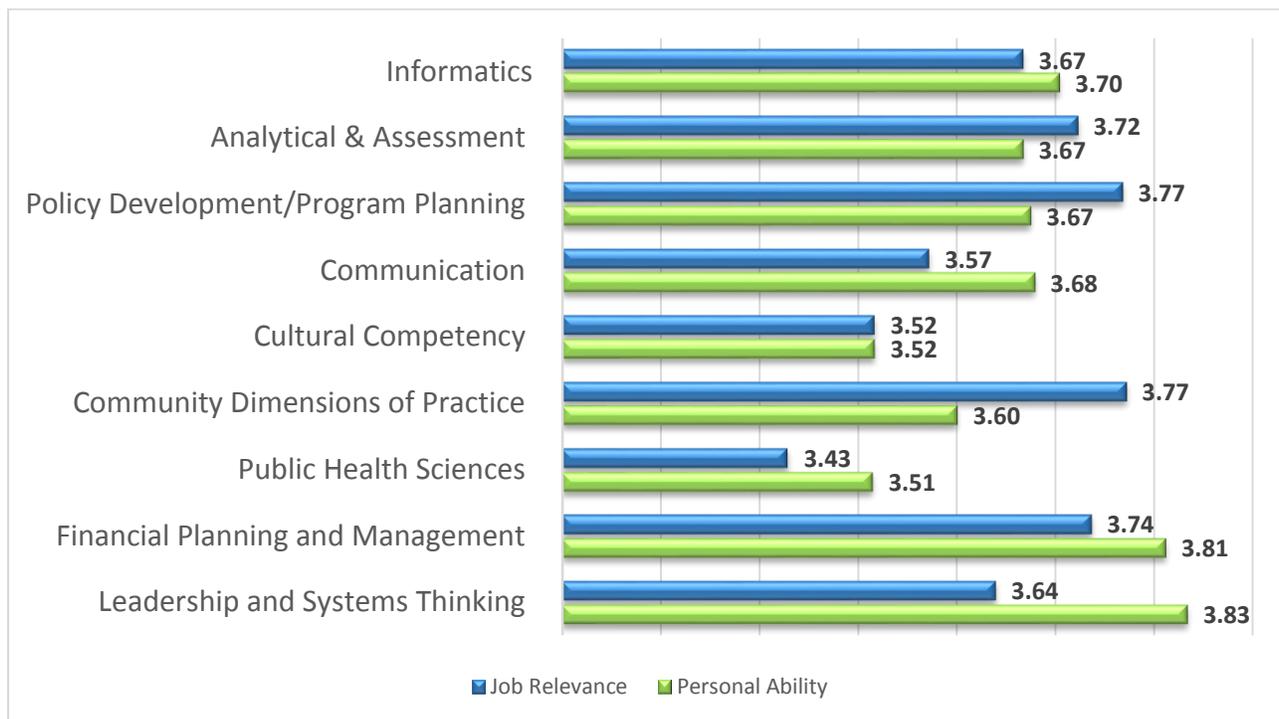
1 being low to 4 being high

Figure 1.2: Tier 2 Core Competency Summary Scores



1 being low to 4 being high

Figure 1.3: Tier 3 Core Competency Summary Scores



1 being low to 4 being high

Appendix C: Needs Scores

For all of the *Figure 2 Series*, the Need Score = Ability Score – Importance/Relevance Score; negative scores indicate a potential need for training.

Figure 2: Agency-Wide Percent of Respondents with a Negative Score



Figure 2.1: Tier 1 Respondents with a Negative Score

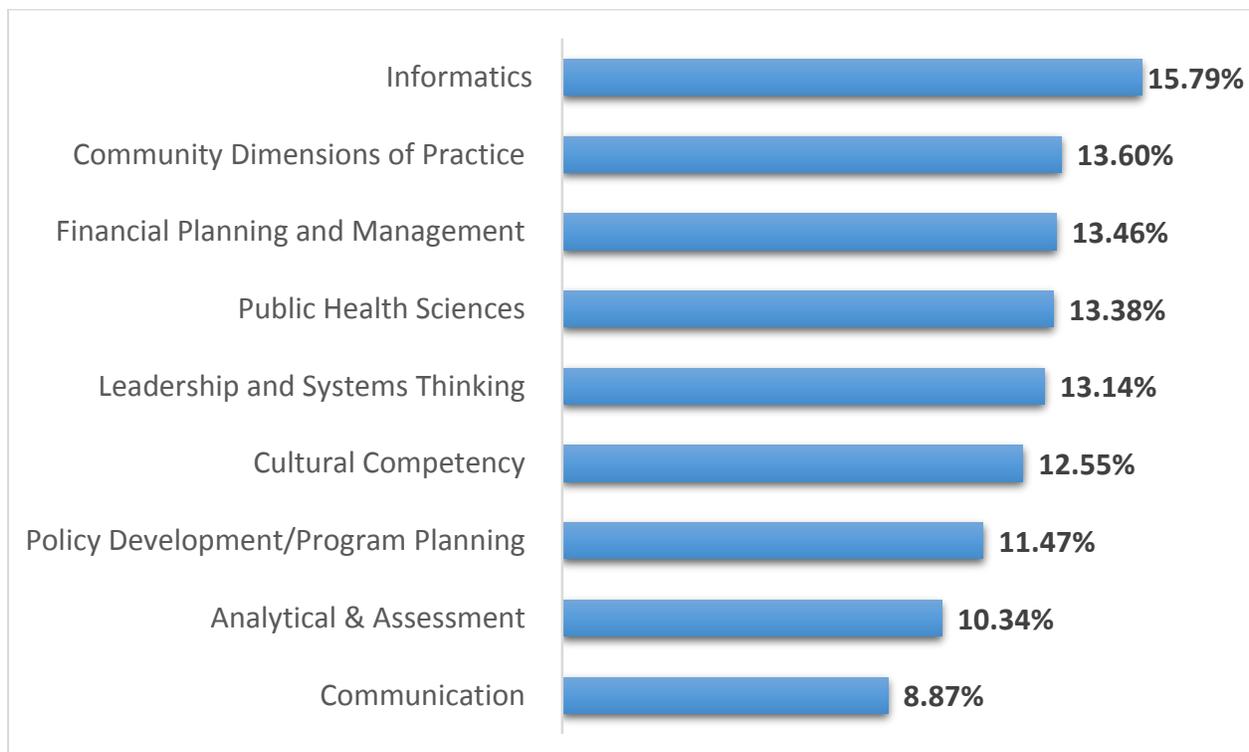


Figure 2.2: Tier 2 Respondents with a Negative Score

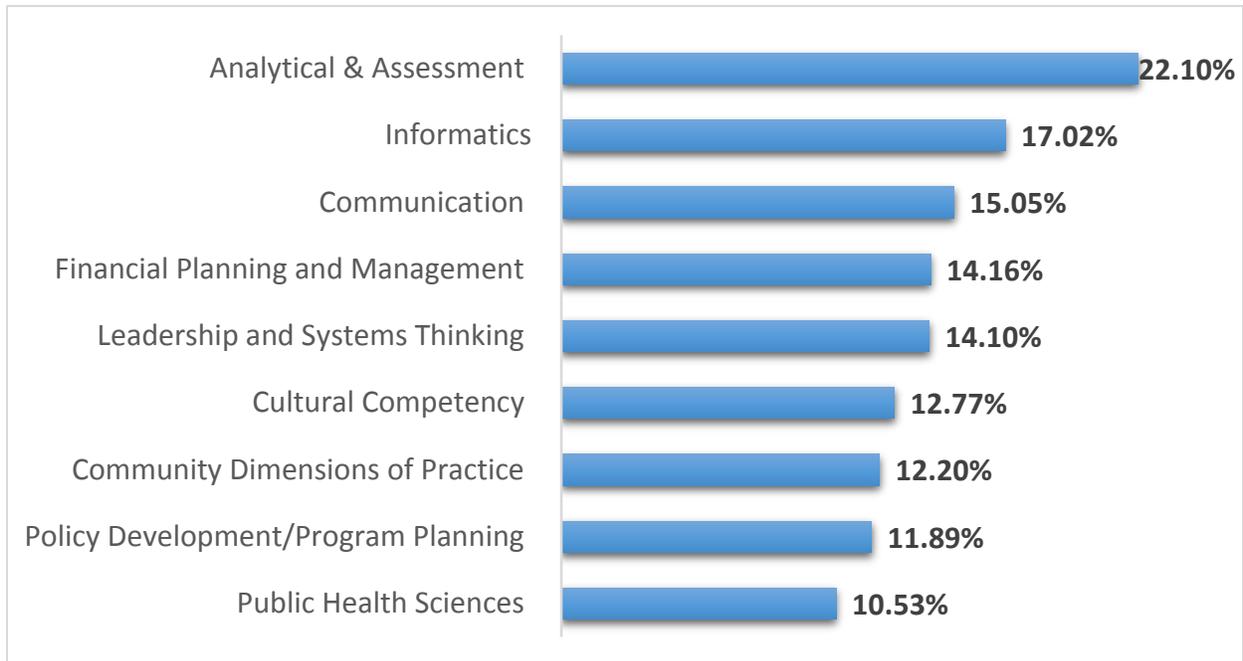


Figure 2.3: Tier 3 Respondents with a Negative Score



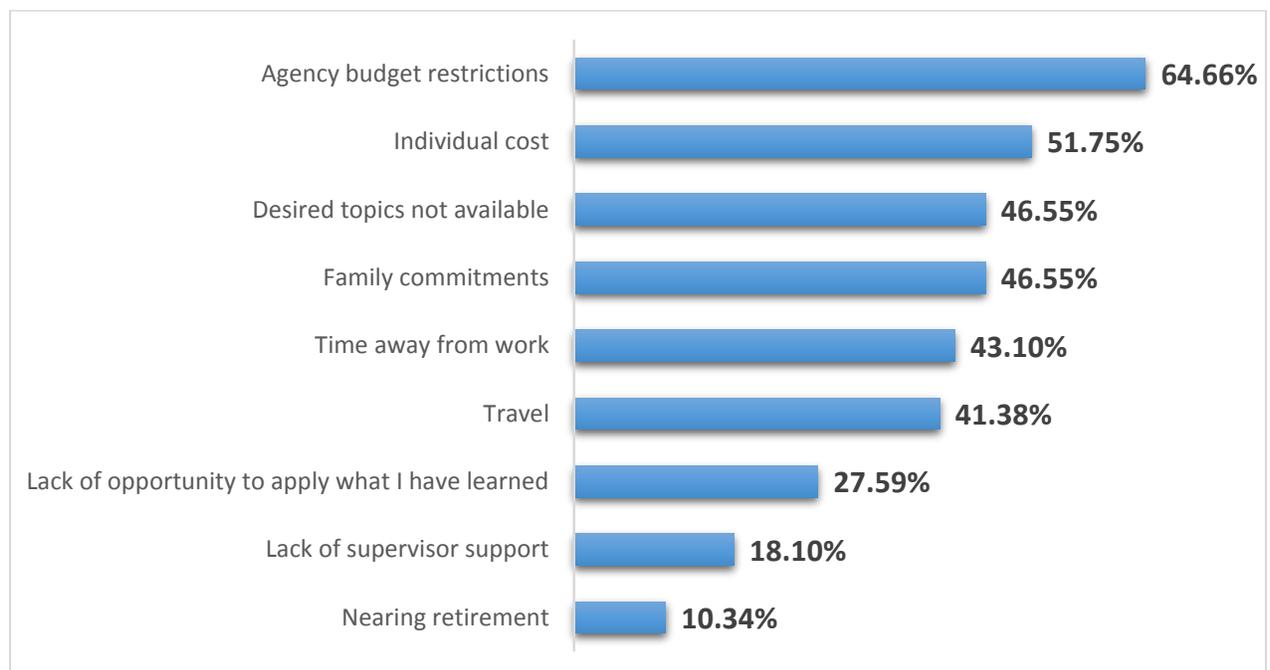
Appendix D: Influencing Factors

Figure 3: Motivators for Participation in Training



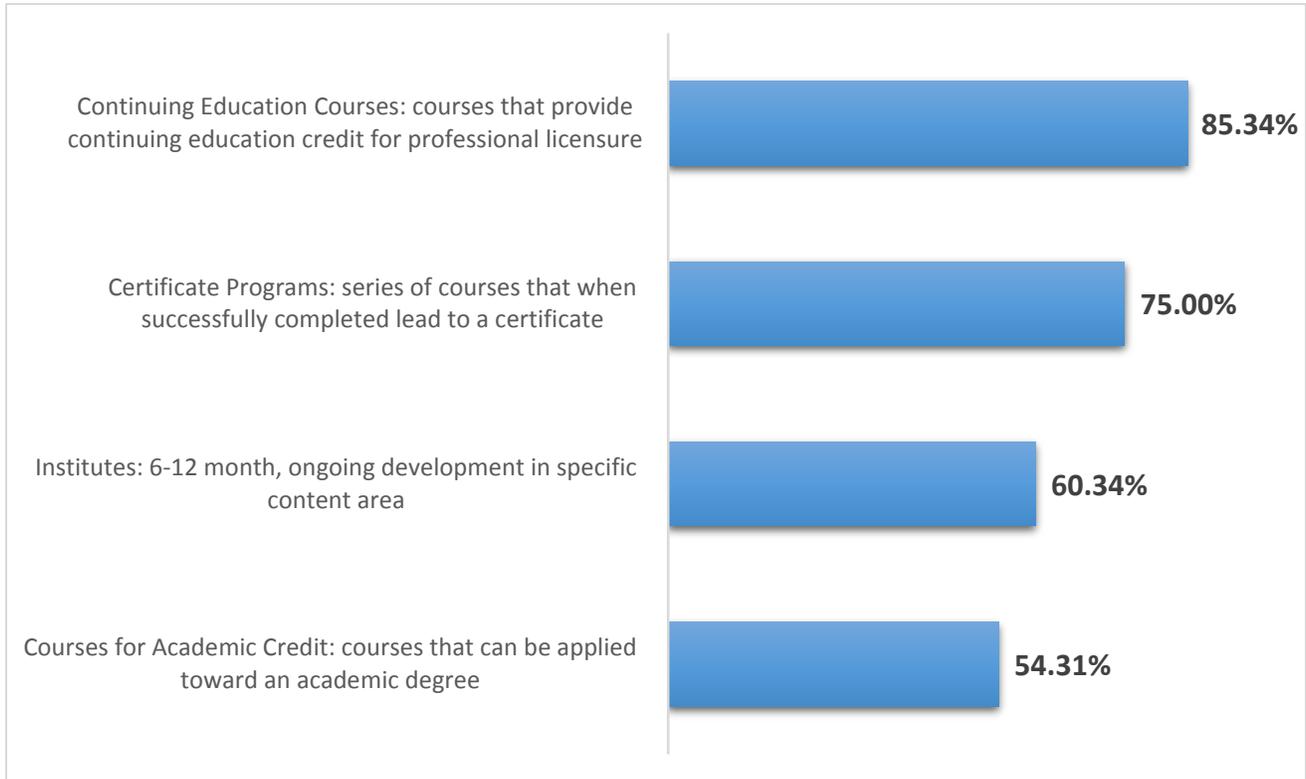
Those who selected Motivator & High Motivator. N=116 for all factors except *Personal Career Advancement* (N=114)

Figure 4: Barriers for Participation in Training



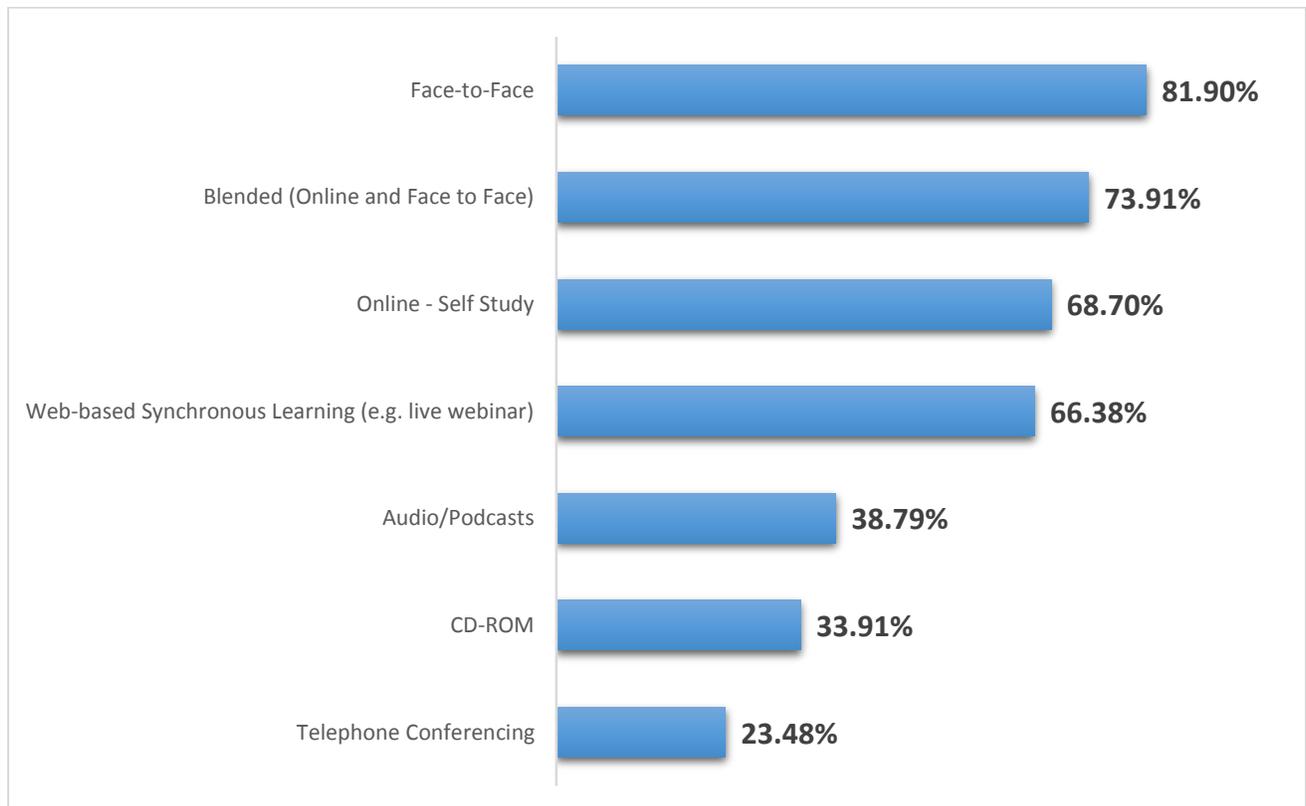
Those who selected Barrier & Very Much a Barrier. N=116 for all factors except *Individual Cost* (N=114)

Figure 5: Course Type Preferences



Those who selected Interested & Very Interested. N=116 for all factors.

Figure 6: Training Delivery Methods



Those who selected Interested & Very Interested. N=116 for all factors except *CD-ROM*, *Online-Self Study*, *Telephone Conferencing*, and *Blended (Online and Face to Face)* (N=115).