

Washington, D.C.: The Equity Imperative in DC Health's Workforce Development Efforts

Case Stories in Public Health Leadership and Practice

Case

The goal of advancing health equity is at the center of DC Health's Workforce Development efforts—particularly those of the Cancer and Chronic Disease Prevention Bureau (Bureau)—and broadly among grantees carrying out program activities in the community. The <u>Health Equity Report: District of Columbia 2018</u> defined nine key drivers of inequity (education, employment, income, housing, transportation, food environment, medical care, outdoor environment, and community safety). The report's findings are used as an organizing framework for the workforce development effort that lays the groundwork for a transition to Public Health 3.0, where the staff all see themselves as "Chief Health Strategists."

Actions

The Bureau conducted a workforce assessment across its divisions/programs (Chronic Disease Tobacco Control Program, Cancer Programs Division, and the DC Cancer Registry) to understand what gaps might prevent the Bureau from addressing the drivers of health inequity. The assessment addressed developing and evaluating of programs, influencing policy and systems change, using public health science, quality improvement, and health equity and cultural competency skills. DC Health has addressed gaps in the following areas uncovered in the assessment: auality improvement, data. creating career pathways, succession planning, and health equity and cultural competency skills. To address these workforce gaps, the Bureau has undertaken the following actions:

 Quality improvement: The Bureau purchased a group subscription to the Institute for Healthcare Improvement (IHI), which will allow staff to expand their knowledge through IHI's many materials on

the subject. The Bureau also held a mandatory staff training facilitated by the Public Health Foundation to improve the Bureau staff's quality improvement knowledge. Staff completed Plan-Do-Study-Act (PDSA) cycles and developed quality improvement projects.

• Data capacity: The Bureau created a data and evaluation team to build capacity for assessing disparities and monitoring advances in equity. The team consists of epidemiologists, data analysts, program evaluators, and a statistician.

Public Health Practice in Action

NACDD explores, supports, and celebrates continuous improvement in state level organizational capacity and public health practice. Our work is grounded in the **ST**ate **A**ctivation and **R**esponse (STAR) conceptual model, which includes six interrelated spokes:

- Workforce Development
- Leadership
- Organizational Climate & Culture
- Partnerships & Relationships
- Management & Administration
- Evidence-Based Public Health Practice



- Career pathways and succession planning: The Bureau established an informal mentoring program to support staff career development and advancement.
- Health equity approach to funding and contracts: The Health Equity Action Team (HEAT) was created to guide evaluation and ensure that the key drivers of inequity in the District are considered and addressed in grants and contracts awarded by the Bureau.
- Training for DC Health staff: The Bureau facilitates collective learning around implicit bias, systemic racism, and health disparities. An Undoing Racism training (facilitated by the <u>Peoples Institute for Survival and Beyond</u>) is being developed. It will be offered to staff in 2021 and a local community-based organization will provide training on cultural competency in working with LGBTQ+ communities.
- Training for grantees: The Community Health Administration where the Bureau sits

 focused its last grantee forum on health equity and social determinants of health.
 The Bureau also holds a yearly symposium, which focused on implicit bias in 2019.
 Grantees assessed their work plans and made changes to remove implicit bias and increase strategies to advance equity.

Successes

- A staff-driven, Bureau-level Health Equity Action Team emerged out of the grantee forums and symposium. Initially, this team will be a learning group similar to a Journal Club, where participants read and discuss articles to inform their thinking and planning; after a formative phase, the group will shift to developing guidance on contracts, requests for applications, agreements, and program implementation.
- The 2019 Community Health Administration Grantee Forum, Understanding Implicit Bias: Health Equity & Public Health 3.0, served as an opportunity to empower grantees to explicitly address health equity in addition to their focus on quality improvement and data and evaluation.
- Given the success of year one, the workforce assessment is now in its second iteration and the Bureau is compiling staff responses in late 2020.

Workforce Development in STAR focuses on establishing a strategic and systematic approach to learning and professional development. This case story provides examples of **Workforce Development** through the following actions:

- The Bureau conducted a workforce assessment at the team level.
- Findings from the workforce assessment were used to guide training activities and to create individual development plans.

Challenges

Everyone has been eager to start this work; the successes and momentum feel more numerous than the challenges.

Impact

Workforce assessment: The Bureau's
 Competency Assessment was developed and administered to assess staff proficiency across the range of skills and knowledge identified in public health to improve community health outcomes. During the initial survey launch, 92% of Bureau staff members completed the assessment. The survey will be administered six months post-launch to assess staff progress.



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- Individual development plans have evolved to incorporate a focus on workforce development by incorporating staff goals for trainings and professional development. Program managers and coordinators have incorporated health equity-focused strategies into their Individual Development Plans (IDPs).
- This foundational workforce development effort informs the way health equity is prioritized in the Bureau's next five-year strategic plan. As part of the strategic planning process, the Bureau completed a root cause analysis and several other workforce development activities focused on health equity and social determinants of health.
- Throughout its process to address health equity, the Bureau has become more explicit
 about its desired focus. Practically, this translates to more specific language—to
 underscore the Bureau's focus on equity—in grant proposals and when awarding
 grants and contracts.

Related Reading

- <u>Using an Inside-Outside Strategy to Build Power and Advance Equity</u>, Human Impact Partners, January 2015
- Advancing Health Equity in Health Department's Public Health Practice, Human Impact Partners, February 2018

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