

BUILDING THE OHIO PUBLIC HEALTH WORKFORCE OF THE FUTURE

From Evidence to Opportunities

September 14, 2023

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PH WINS
PUBLIC HEALTH WORKFORCE
INTERESTS AND NEEDS SURVEY

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BOLD SOLUTIONS FOR HEALTHIER COMMUNITIES™

We advance policy, build partnerships, and strengthen public health to create communities where everyone can achieve their best possible health.



Moriah Robins

Research Officer



Kay Schaffer

Senior Research Associate

OBJECTIVES

1. Identify strengths and opportunities for growth of the governmental public health workforce in Ohio.
2. Evaluate workforce development opportunities for the governmental public health workforce in Ohio.
3. Understand how evidence from the Public Health Workforce Interests and Needs Survey (PH WINS) can be used to improve the climate in and address the training needs of employees in governmental public health departments in Ohio.

PH WINS

PUBLIC HEALTH WORKFORCE
INTERESTS AND NEEDS SURVEY

The Public Health Workforce Interests and Needs Survey (PH WINS), the first and only nationally representative survey of state and local governmental public health workers, aims to:



**Influence investments in
workforce development**



**Build the evidence
base of training needs**



**Identify trends in attitudes,
morale, and climate**

PH WINS 2021 SURVEY INSTRUMENT



THE PUBLIC HEALTH WORKFORCE IN THE COVID-19 ERA

Final survey included:

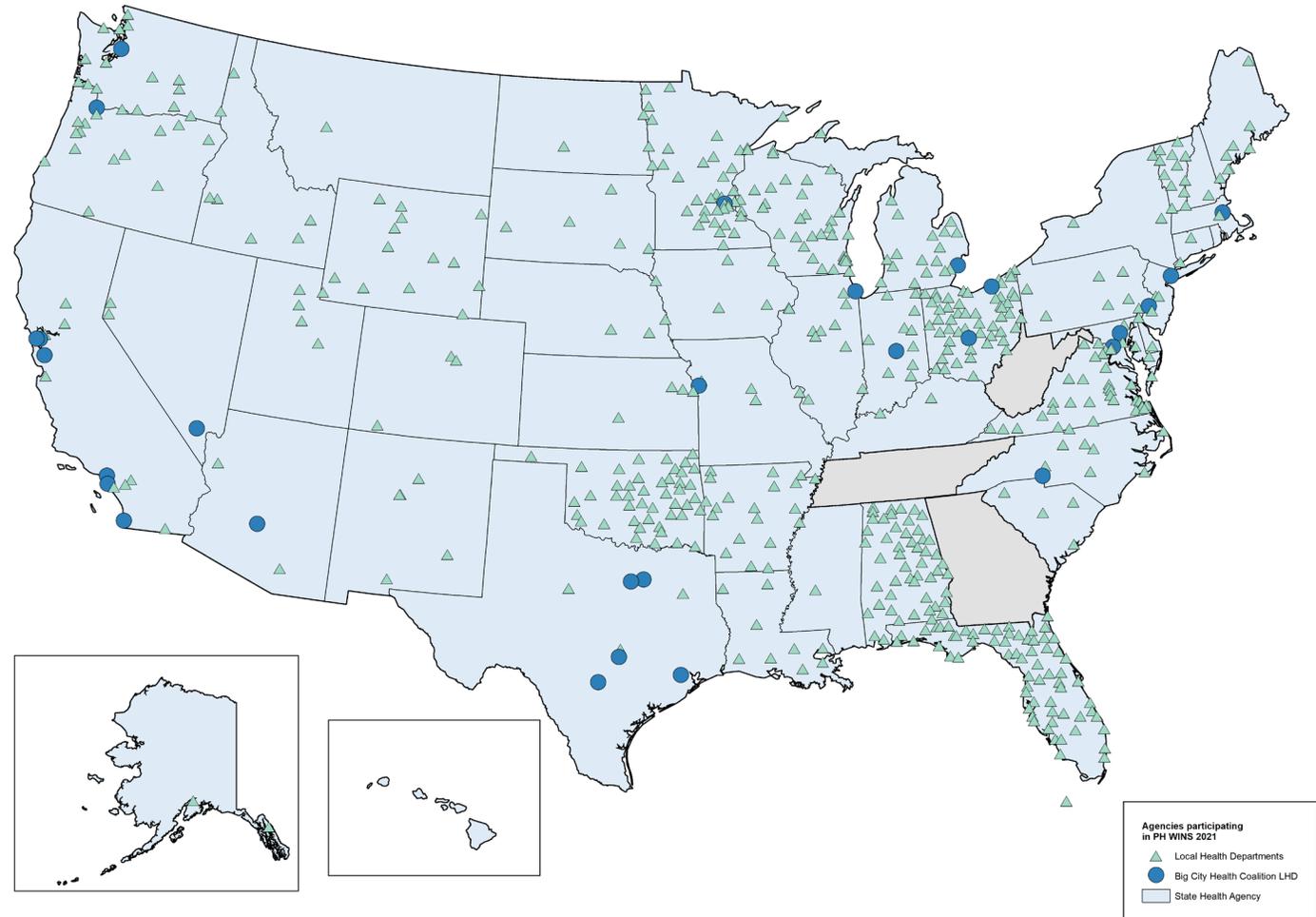
1. Workplace engagement, satisfaction, and intent to leave -- includes mental and emotional well-being
2. COVID-19 Response
3. Training needs
4. Addressing public health issues - awareness/confidence of health equity and ability to address "Racism as a Public Health Crisis"
5. Demographics & workforce characteristics

PH WINS 2021 IN THE FIELD

PH WINS 2021 was distributed from Sept. 2022 to Jan. 2023 to 137,446 state and local governmental public health workers:

- 47 state health agencies (SHA)
- 288 decentralized local health departments (LHDs)

44,732 individuals completed the survey.



EVOLUTION OF THE PH WINS SAMPLE

PH WINS 2014

- 37 state health agencies
- 14 big city health departments
- 50 local health departments – pilot

*representative sample of employees in participating agencies

PH WINS 2021

- 47 state health agencies
- 29 big city health departments
- 288 decentralized local health departments

*census of employees in participating agencies

PH WINS 2017

- 47 state health agencies
- 25 big city health departments
- 71 local health departments

*census of employees in participating agencies

Inclusion criteria for LHDs in 2014 and 2017:

- Staff size > 25
- Population served > 25,000

PH WINS FOR ALL PILOT

Partnership between



REGION **V** PUBLIC HEALTH
TRAINING CENTER

Northwest Center
FOR PUBLIC HEALTH PRACTICE

Goal: recruit all local health departments in Regions V and X regardless of staff size and population served

Region V: Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin

- Approximately 500 LHDs

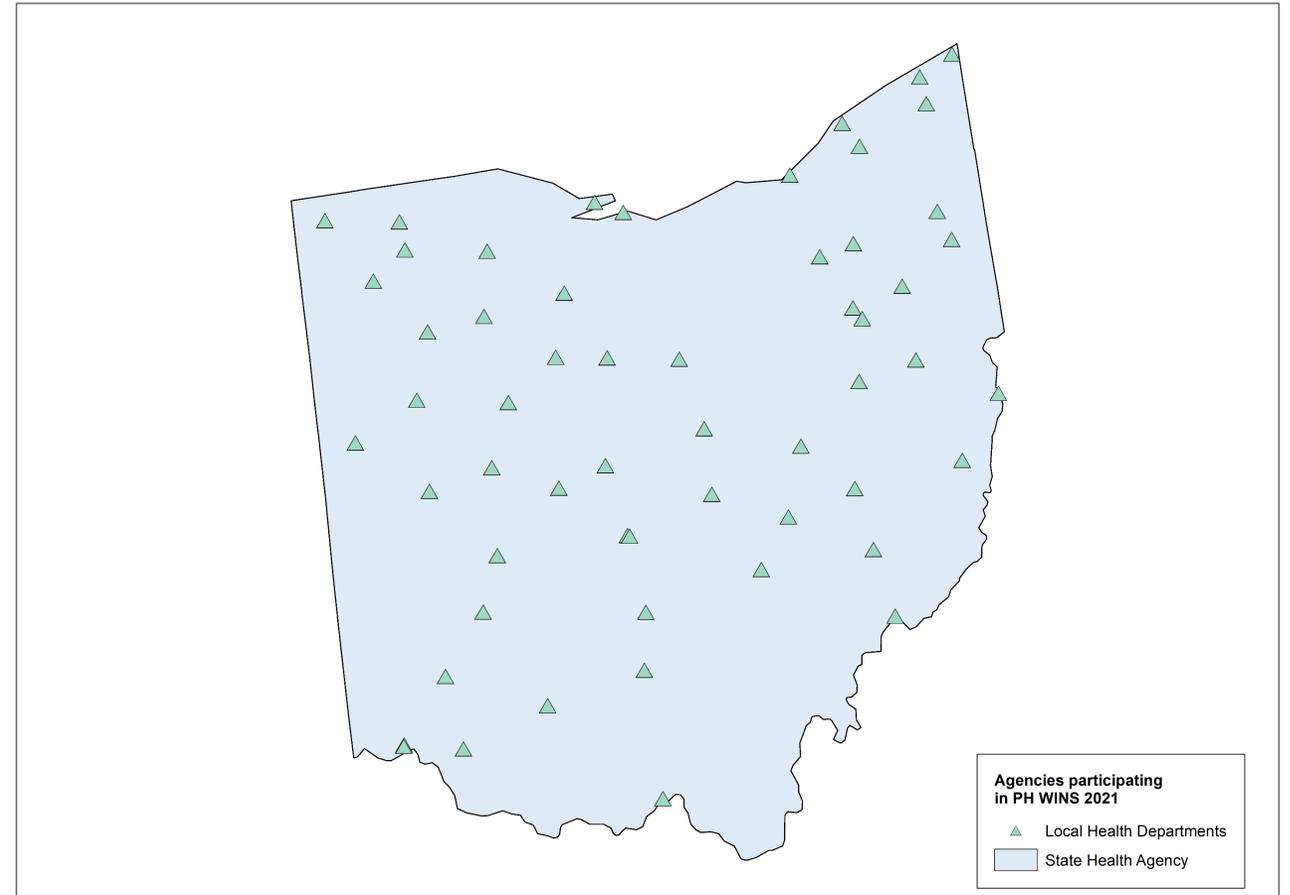
Region X: Alaska, Idaho, Oregon, and Washington

- Approximately 80 LHDs

PH WINS PARTICIPATION IN OHIO

Ohio received 2,309 responses
- a 49% response rate

Department Type	Participants	Agency
SHA-CO	326	1
Large LHD	542	6
Medium LHD	1,189	31
Small LHD	252	25



STRATEGIES TO BUILD THE FUTURE WORKFORCE



Reassess Staffing



Improve Recruitment & Retention



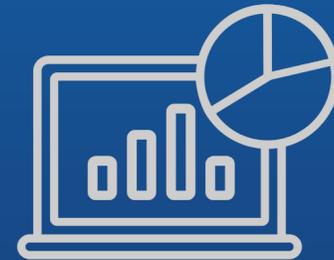
Invest in Employees & the Organizational Culture



Develop Leaders



Address Structural Racism



Modernize & Expand the Data



Reassess Staffing

According to a new analysis by the
de Beaumont Foundation and the Public Health
National Center for Innovations, the nation needs

80,000

more full-time-equivalent positions in state and local
health departments to provide basic community services.



● CURRENT POSITIONS = 103,500

● TOTAL POSITIONS NEEDED = 183,500

Source: <https://debeaumont.org/staffing-up/>

deBeaumont.org

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INTERESTS AND NEEDS SURVEY

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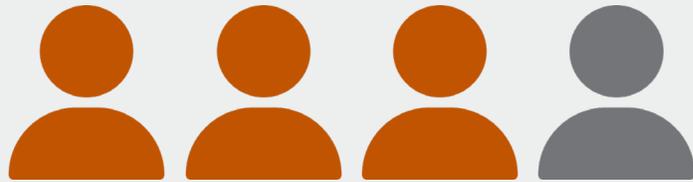


Reassess Staffing

THE STATE AND LOCAL GOVERNMENTAL PUBLIC HEALTH WORKFORCE SAW HIGH RATES OF DEPLOYMENT TO COVID-19 RESPONSE ACTIVITIES

Region V

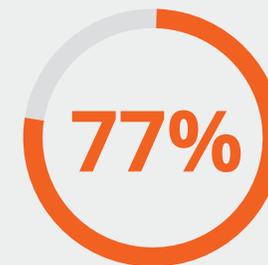
Ohio



Nationally, nearly 3 in 4 state and local governmental public health workers served in a COVID-19 response role



Nationally, 75% of all new hires served in a COVID-19 pandemic response role





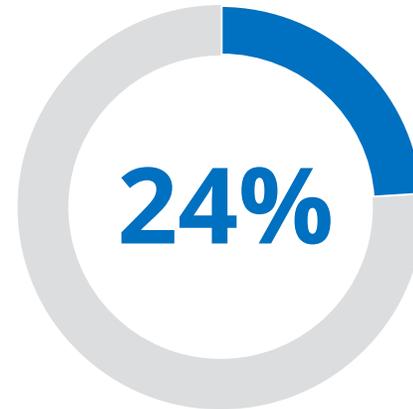
Improve Recruitment
& Retention

NEARLY A QUARTER OF THE WORKFORCE SAID THEY ARE CONSIDERING LEAVING THEIR ORGANIZATION IN THE NEXT YEAR.

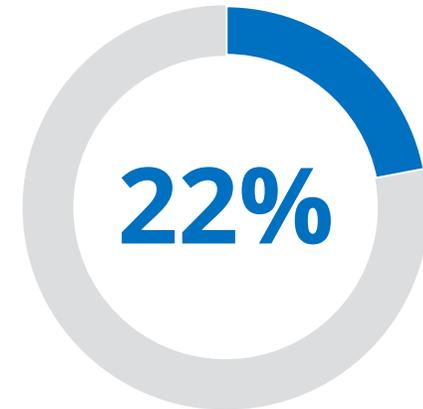
27%
plan to leave in the next year
for reasons other than
retirement



Region V



Ohio





Improve Recruitment
& Retention

WORK OVERLOAD/BURNOUT AND STRESS ARE THE TOP REASONS FOR LEAVING IDENTIFIED BY EMPLOYEES IN REGION V AND OHIO.

REASONS FOR LEAVING



	Region V	Ohio
Work overload / burnout	47%	45%
Stress	45%	41%
Pay	38%	43%
Organizational climate/culture	37%	37%
Lack of opportunities for advancement	32%	37%



Invest in Employees &
the Organizational Culture

A MAJORITY OF STATE AND LOCAL GOVERNMENTAL PUBLIC HEALTH WORKERS ARE SATISFIED WITH THEIR JOBS AND THE ORGANIZATIONS THEY WORK IN. THEY ARE ALSO MISSION-DRIVEN AND HIGH-ACHIEVERS.

	Satisfied with job	Satisfied with organization	"The work I do is important."	"I am determined to give my best effort at work every day."
National	79%	68%	94%	93%
Region V	79%	69%	95%	93%
Ohio	80%	70%	95%	94%



Invest in Employees &
the Organizational Culture

STATE AND LOCAL GOVERNMENTAL PUBLIC HEALTH WORKERS **REPORT CHALLENGES** WITH TECHNOLOGY, COMMUNICATION, AND LACK OF REWARD FOR CREATIVITY. THEY ALSO FEEL THAT THEIR **TRAINING NEEDS ARE NOT ASSESSED**.

Percentage of employees that agree or strongly agree with the following statements (bottom 4):

	National	Region V	Ohio
My training needs are assessed	56%	58%	56%
Employees have sufficient training to fully utilize technology	56%	56%	57%
Communication between senior leadership and employees is good	50%	47%	49%
Creativity and innovation are rewarded	46%	47%	48%

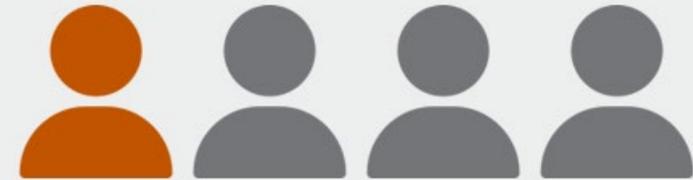


Invest in Employees &
the Organizational Culture

A HIGHER PROPORTION OF EMPLOYEES IN REGION V AND OHIO RATE THEIR **MENTAL OR EMOTIONAL HEALTH FAIR OR POOR** AS COMPARED TO EMPLOYEES NATIONALLY



Nationally, 1 in 5 report their mental health as either fair or poor

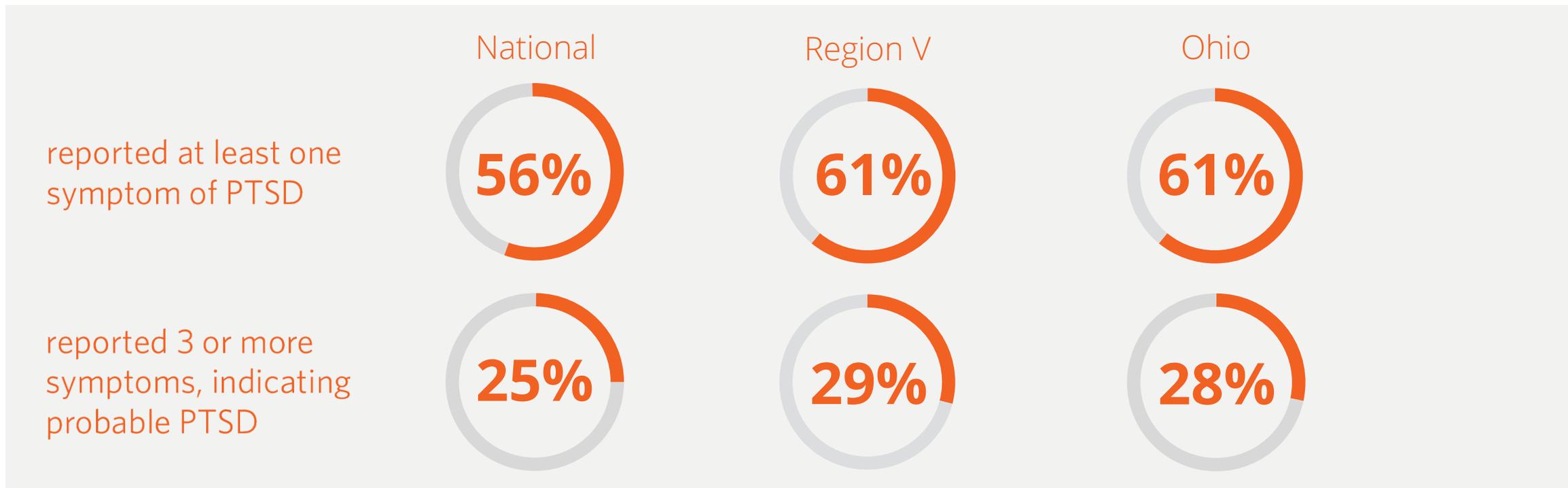


In Region V and Ohio, 1 in 4 report their mental health as either fair or poor



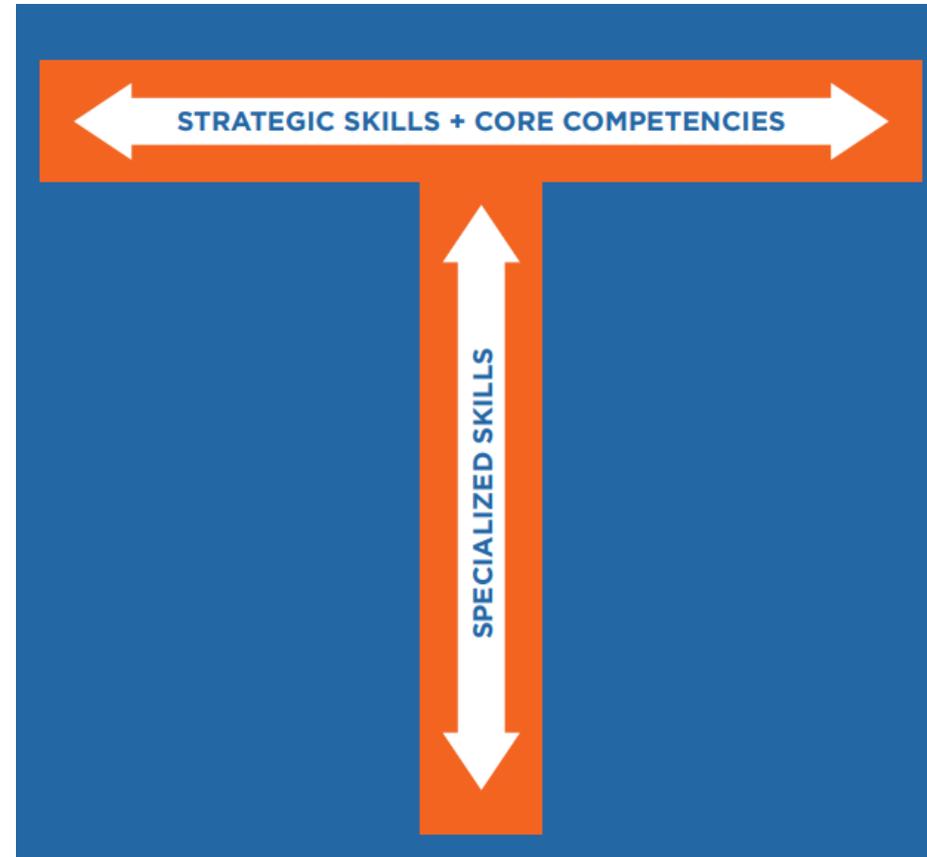
Invest in Employees &
the Organizational Culture

MORE THAN ONE-HALF OF PUBLIC HEALTH EMPLOYEES REPORT SYMPTOMS OF POST-TRAUMATIC STRESS DISORDER.



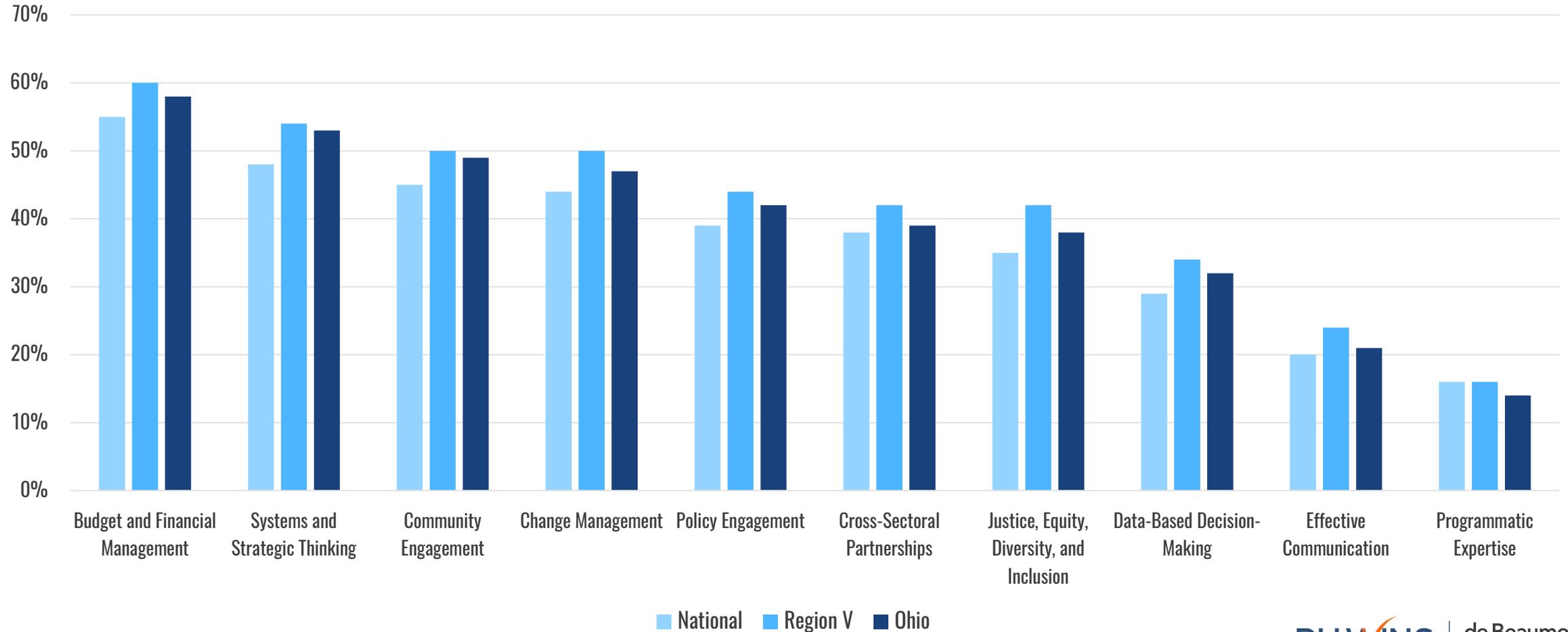


THE WORKFORCE REPORTS **A NEED FOR TRAINING ON SKILLS THAT ARE CRITICAL TO ADDRESSING PUBLIC HEALTH CHALLENGES NOW AND IN THE FUTURE.**





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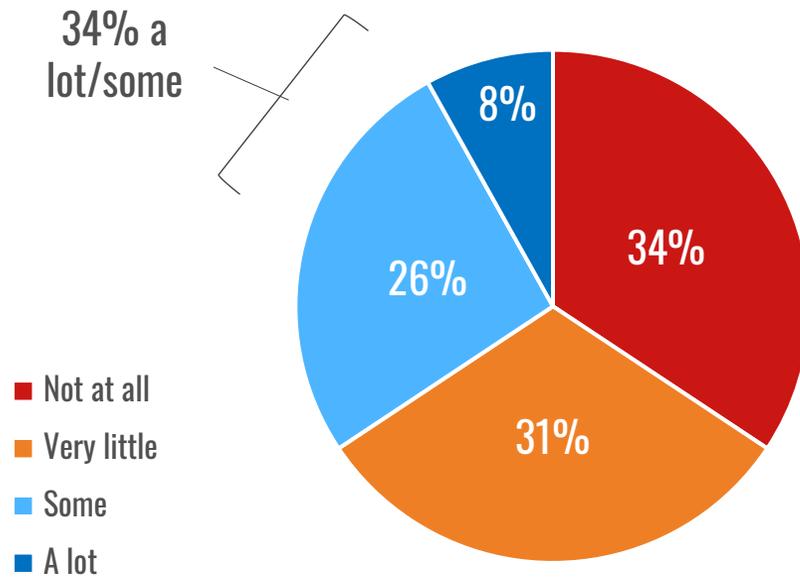
All Ohio Employees	Non-Supervisors	Supervisors, Managers, & Executives
Budget and Financial Management	Budget and Financial Management	Systems and Strategic Thinking
Systems and Strategic Thinking	Systems and Strategic Thinking	Budget and Financial Management
Community Engagement	Change Management	Community Engagement
Change Management	Community Engagement	Justice, Equity, Diversity, and Inclusion
Policy Engagement	Policy Engagement	Policy Engagement
Cross-Sectoral Partnerships	Cross-Sectoral Partnerships	Change Management
Justice, Equity, Diversity, and Inclusion	Justice, Equity, Diversity, and Inclusion	Cross-Sectoral Partnerships
Data-Based Decision-Making	Data-Based Decision-Making	Data-Based Decision-Making
Effective Communication	Effective Communication	Effective Communication
Programmatic Expertise	Programmatic Expertise	Programmatic Expertise



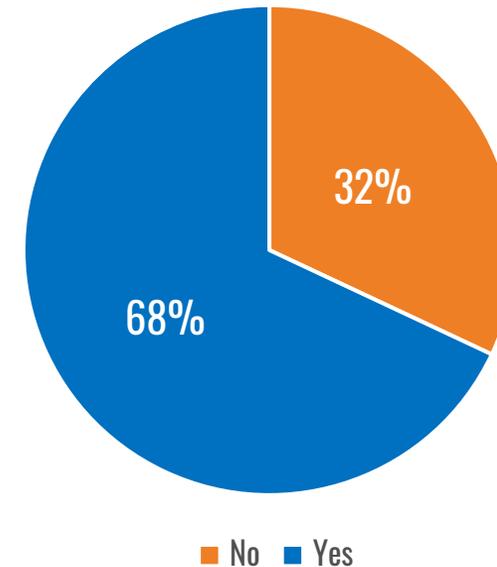
Address Structural Racism

OVER HALF THE OHIO WORKFORCE HAS NOT ENGAGED IN EFFORTS TO ADDRESS RACISM AS A PUBLIC HEALTH CRISIS.

To what extent have you been engaged in efforts to address RaPHC in your health department?



Do you believe that addressing racism as a public health crisis should be a part of your job at your health department?

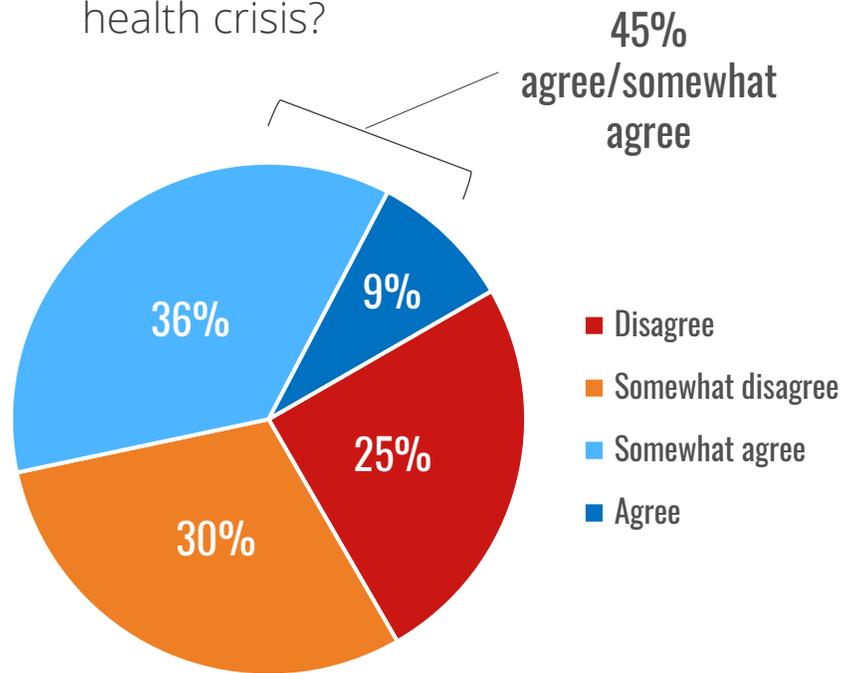




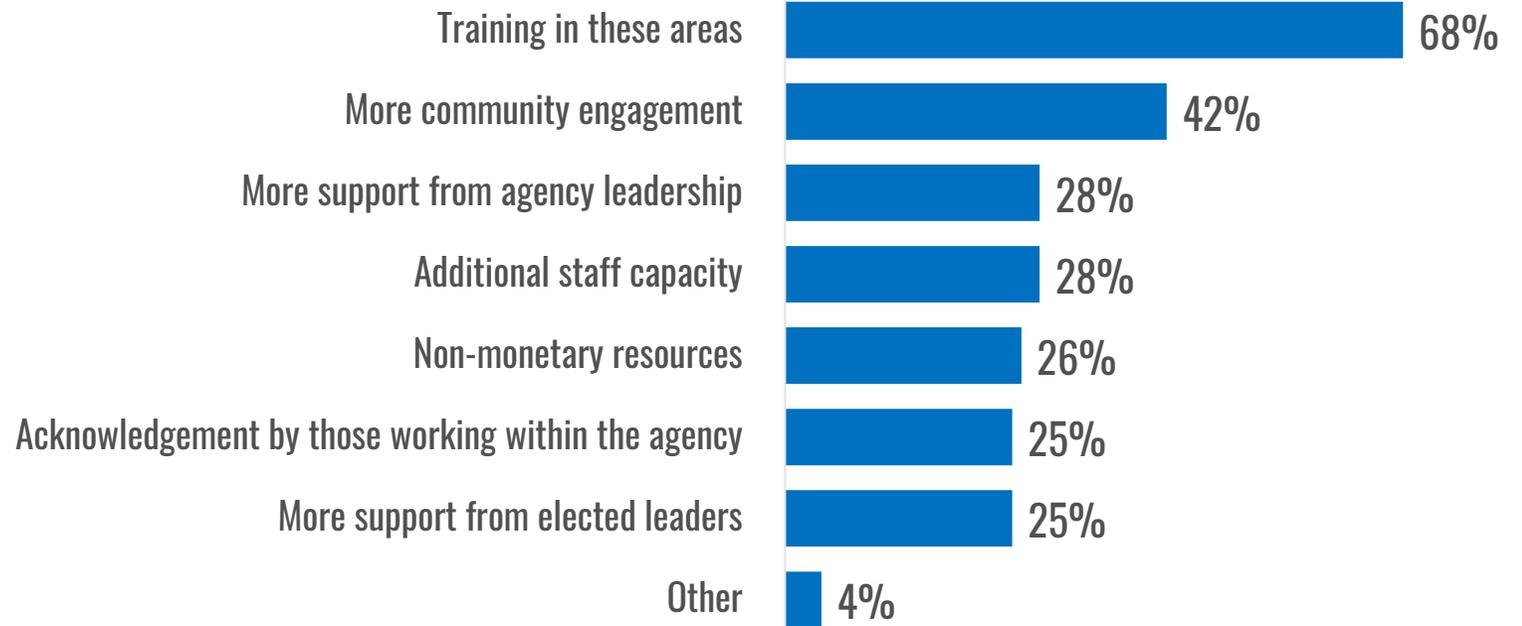
Address Structural Racism

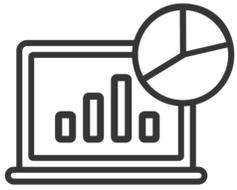
THE OHIO WORKFORCE IDENTIFIES FUNDING AND TRAINING AS BARRIERS TO ADDRESSING RACISM AS A PUBLIC HEALTH CRISIS.

Do you feel that you have adequate funding to address racism as a public health crisis?



Which of the following do you need to address racism as a public health crisis? Select up to 3.





Modernize & Expand
the Data

EMPOWER PUBLIC HEALTH AGENCIES, NATIONAL MEMBERSHIP ORGANIZATIONS,
RESEARCHERS, AND THE FEDERAL GOVERNMENT TO **USE THE DATA FOR ACTION**

PH WINS DASHBOARDS



DEMOGRAPHICS



TRAINING NEEDS



WORKFORCE
CHARACTERISTICS



ENGAGEMENT &
SATISFACTION



STAYING & LEAVING



WELL-BEING



HEALTH EQUITY CONCEPTS

REFLECT & DISCUSS

- What findings or ideas stood out to you and why? What are your main takeaways?
- As leaders in your health departments, what opportunities do you see to leverage these data for change?
- What barriers do you see to enacting those changes? What opportunities do you see to build on your workforce's strengths to overcome them?



LOCAL HEALTH DEPARTMENTS IN OHIO – A STORY OF A WIDENING GAP

1. Race and ethnicity
2. Educational attainment
3. Service mix
4. Training needs

DEFINITIONS

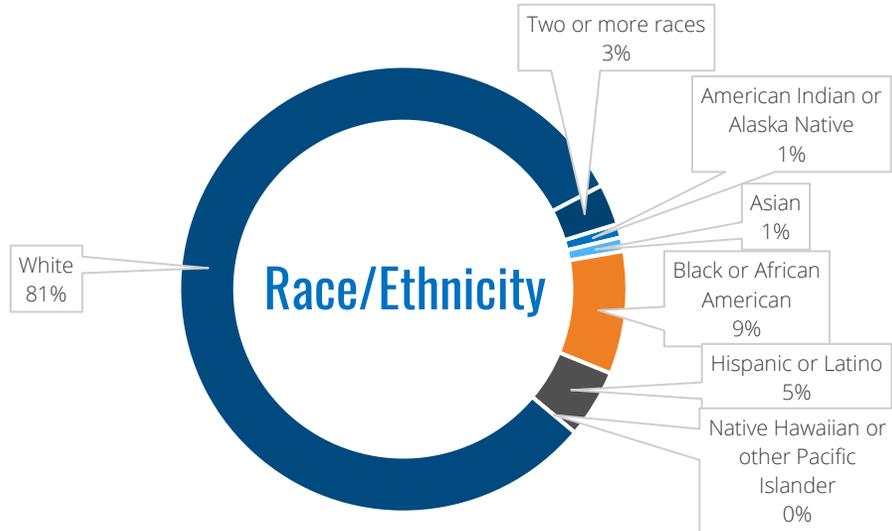
Ohio – all governmental public health employees serving in Ohio

Local health departments (LHDs)

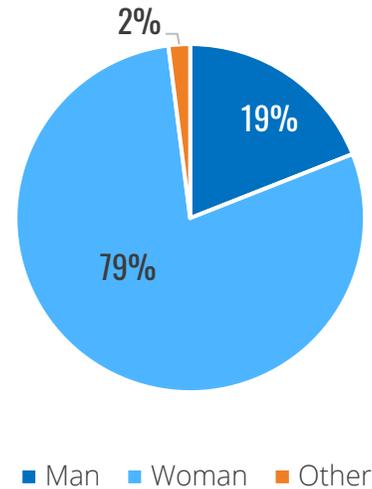
- Large LHDs = serving population greater than 250,000 people
- Medium LHDs = serving a population between 25,000 and 250,000 people
- Small LHDs = serving a population less than 25,000 people

OHIO DEMOGRAPHICS

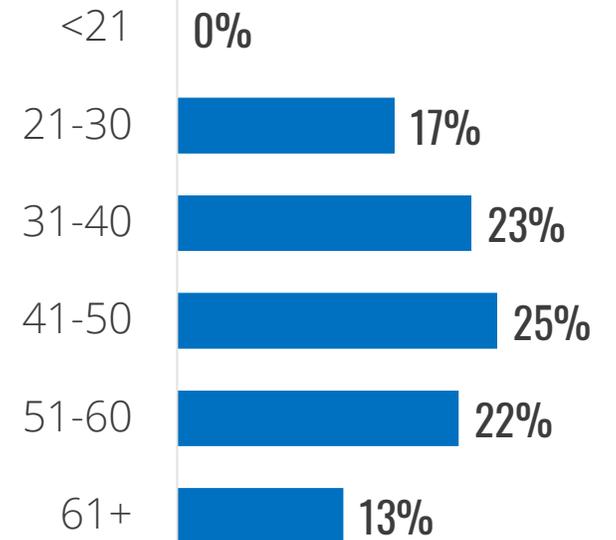
THE OHIO GOVERNMENTAL PUBLIC HEALTH WORKFORCE PREDOMINANTLY SELF-IDENTIFIES AS WHITE, A WOMAN, AND IS OVER THE AGE OF 40.



Gender



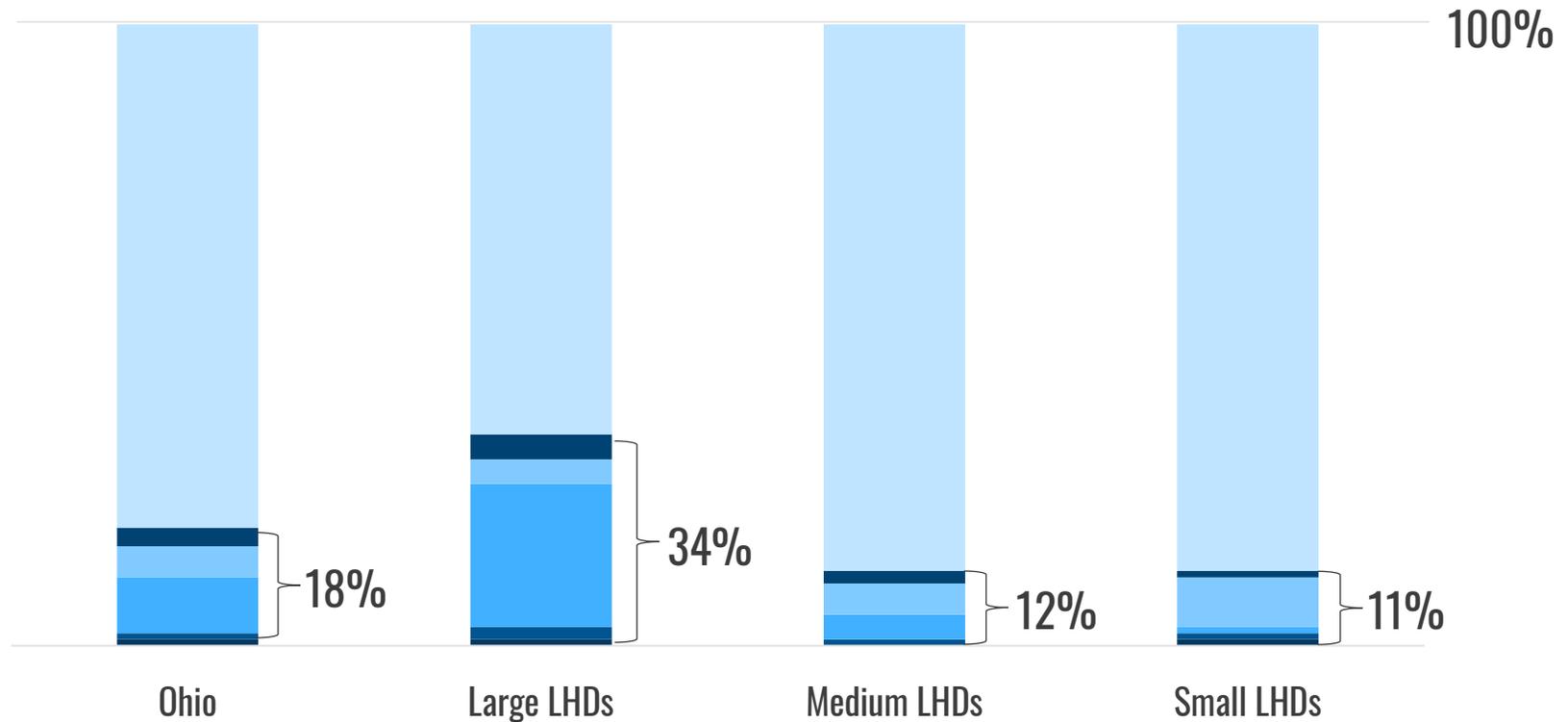
Age



OHIO RACE AND ETHNICITY BY AGENCY SIZE

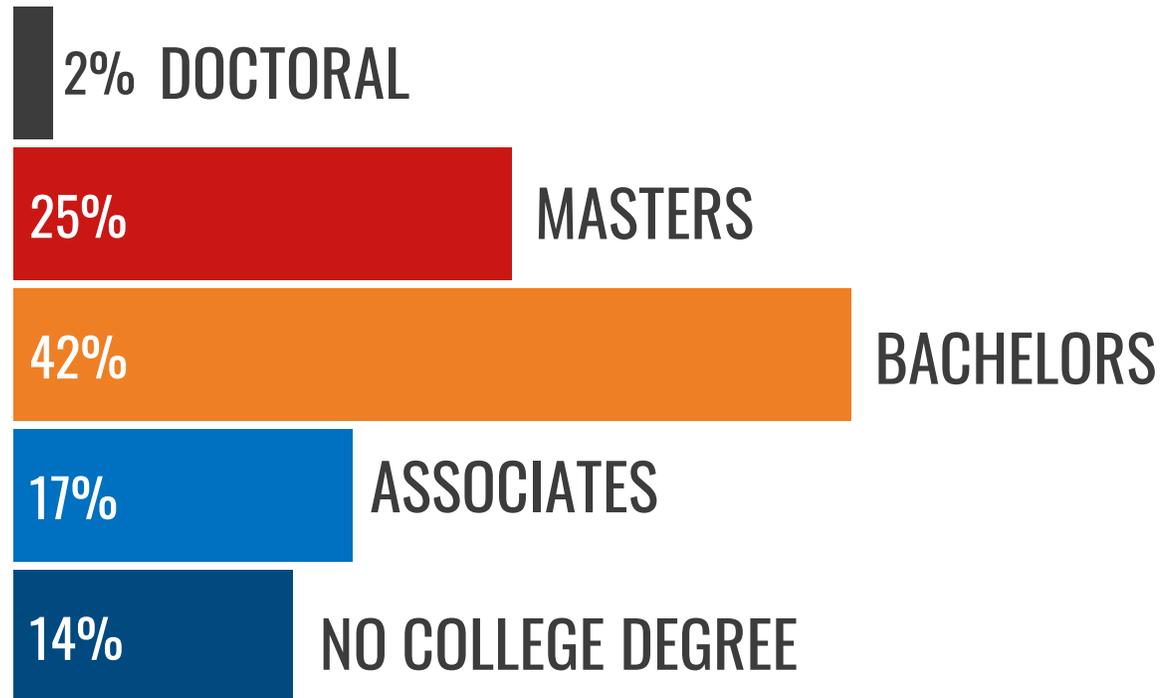
SMALL AND MEDIUM LHDS IN OHIO HAVE THE SMALLEST PROPORTION OF EMPLOYEES WHO IDENTIFY AS BIPOC

- White
- Two or more races
- Native Hawaiian or other Pacific Islander
- Hispanic or Latino
- Black or African American
- Asian
- American Indian or Alaska Native



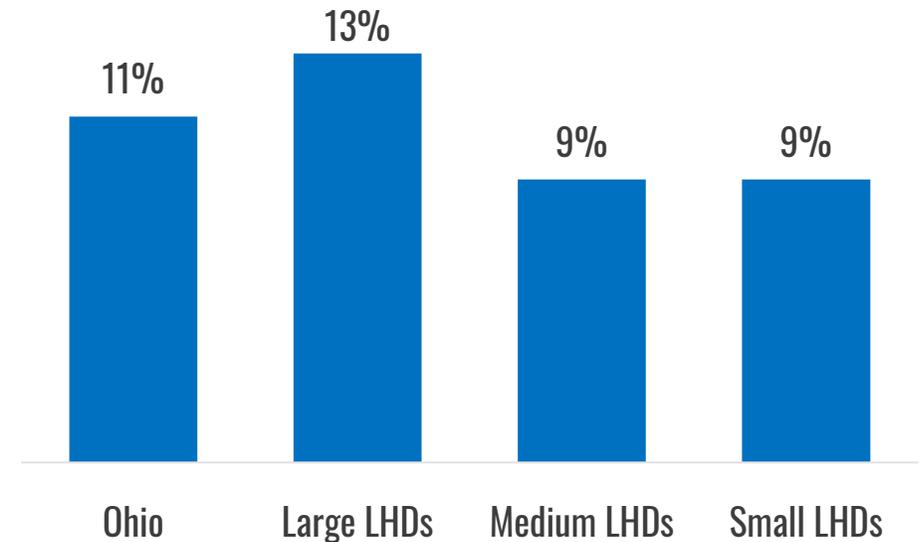
OHIO EDUCATIONAL ATTAINMENT

THE OHIO GOVERNMENTAL PUBLIC HEALTH WORKFORCE IS **GENERALLY WELL EDUCATED**



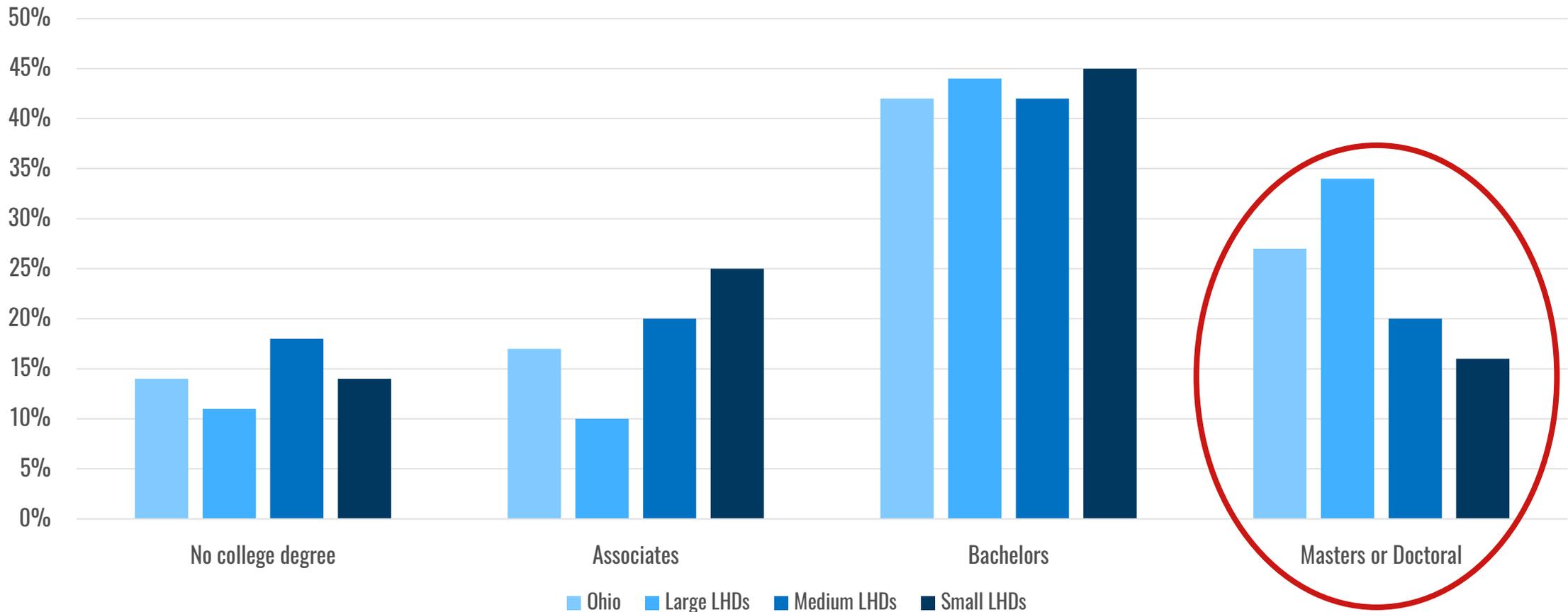
BUT ONLY 11% HAS FORMAL TRAINING IN PUBLIC HEALTH.

FORMAL PUBLIC HEALTH TRAINING BY AGENCY SIZE



OHIO EDUCATIONAL ATTAINMENT BY AGENCY SIZE

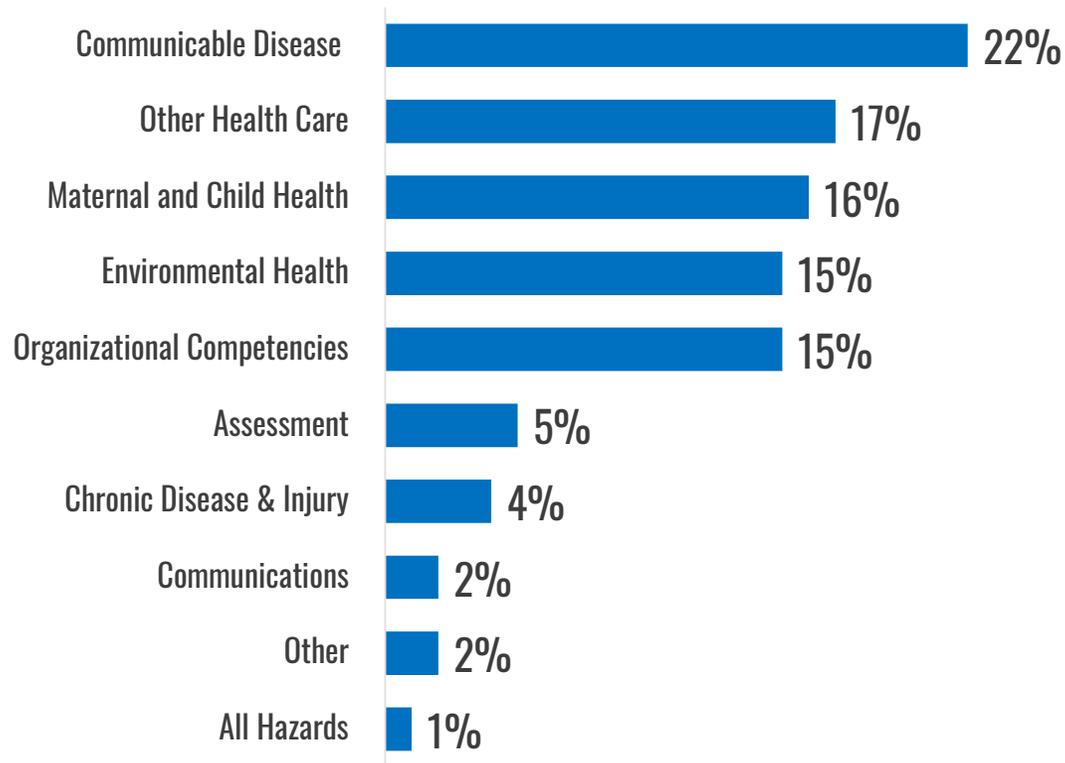
SMALL LHDS IN OHIO HAVE THE LOWEST PROPORTION OF WORKERS WITH A MASTERS OR DOCTORAL DEGREE



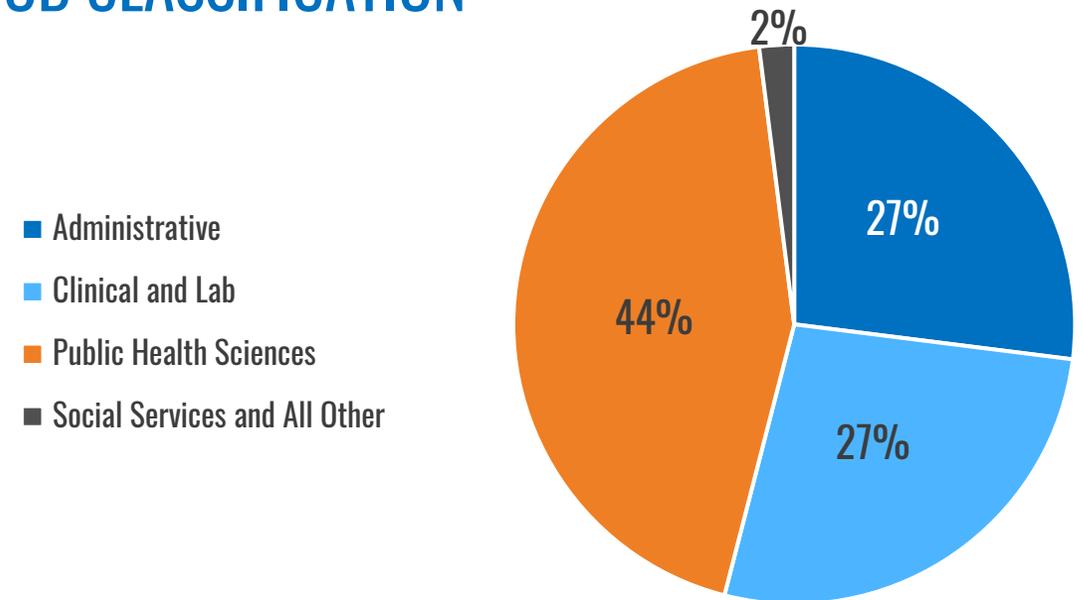
OHIO PROGRAM AREA & JOB ROLES

A MAJORITY REGION V GOVERNMENTAL PUBLIC HEALTH WORKERS SERVE IN **COMMUNICABLE DISEASE AND IN PUBLIC HEALTH SCIENCES ROLES**

PROGRAM AREA

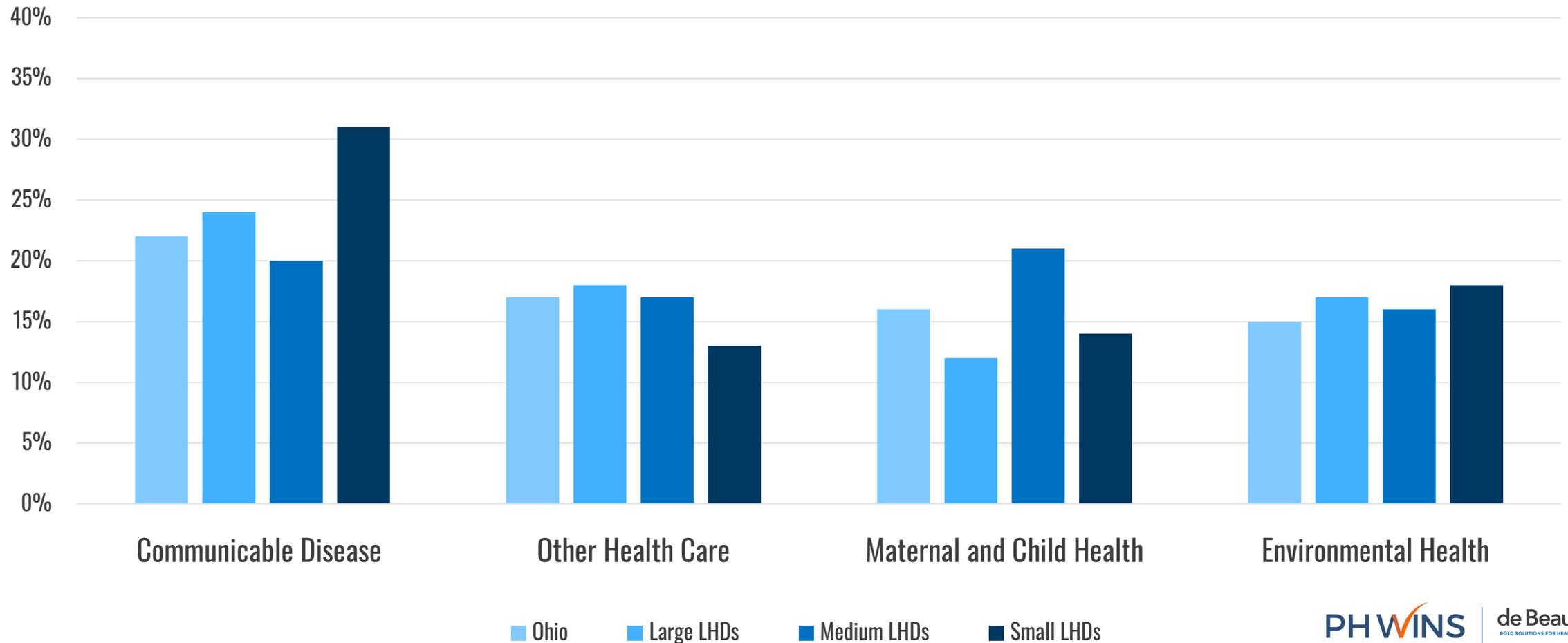


JOB CLASSIFICATION



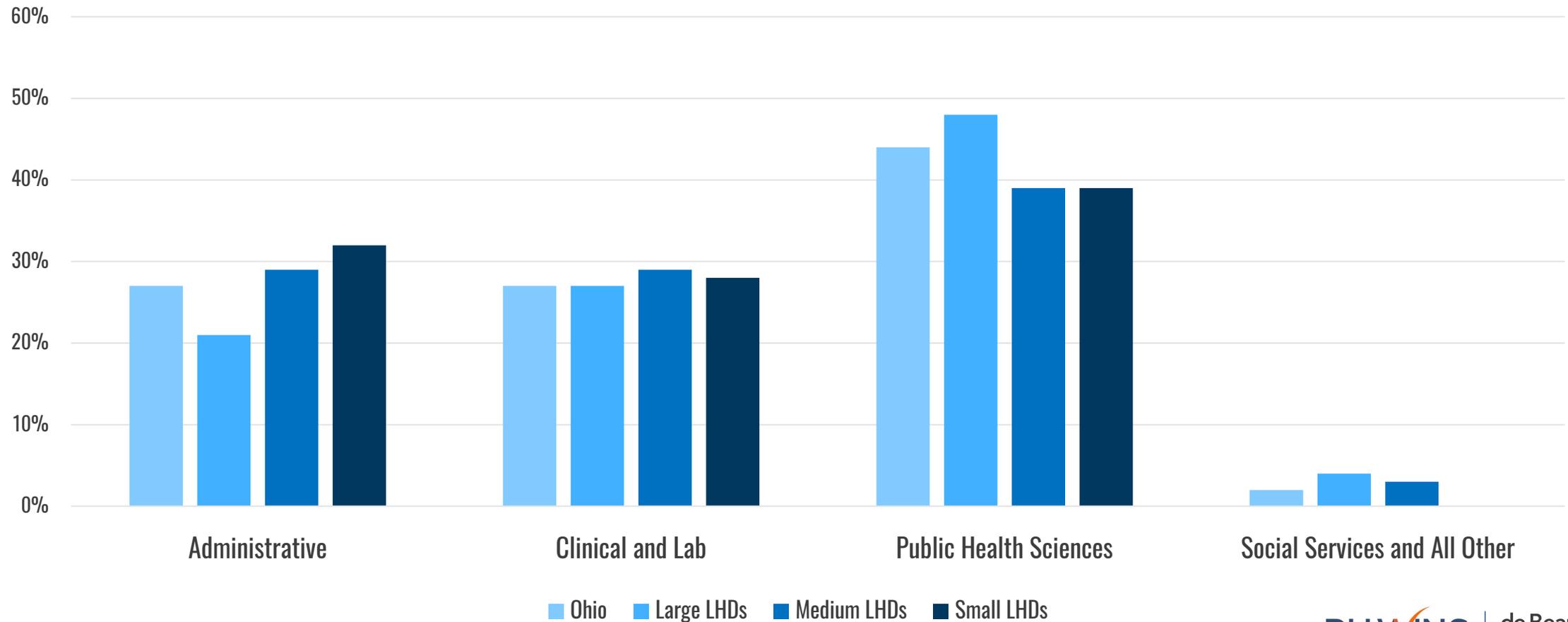
TOP 4 OHIO PROGRAM AREAS BY AGENCY SIZE

THE **COMMUNICABLE DISEASE AND MATERNAL AND CHILD HEALTH** PROGRAM AREAS HAVE THE MOST VARIATION BY AGENCY SIZE



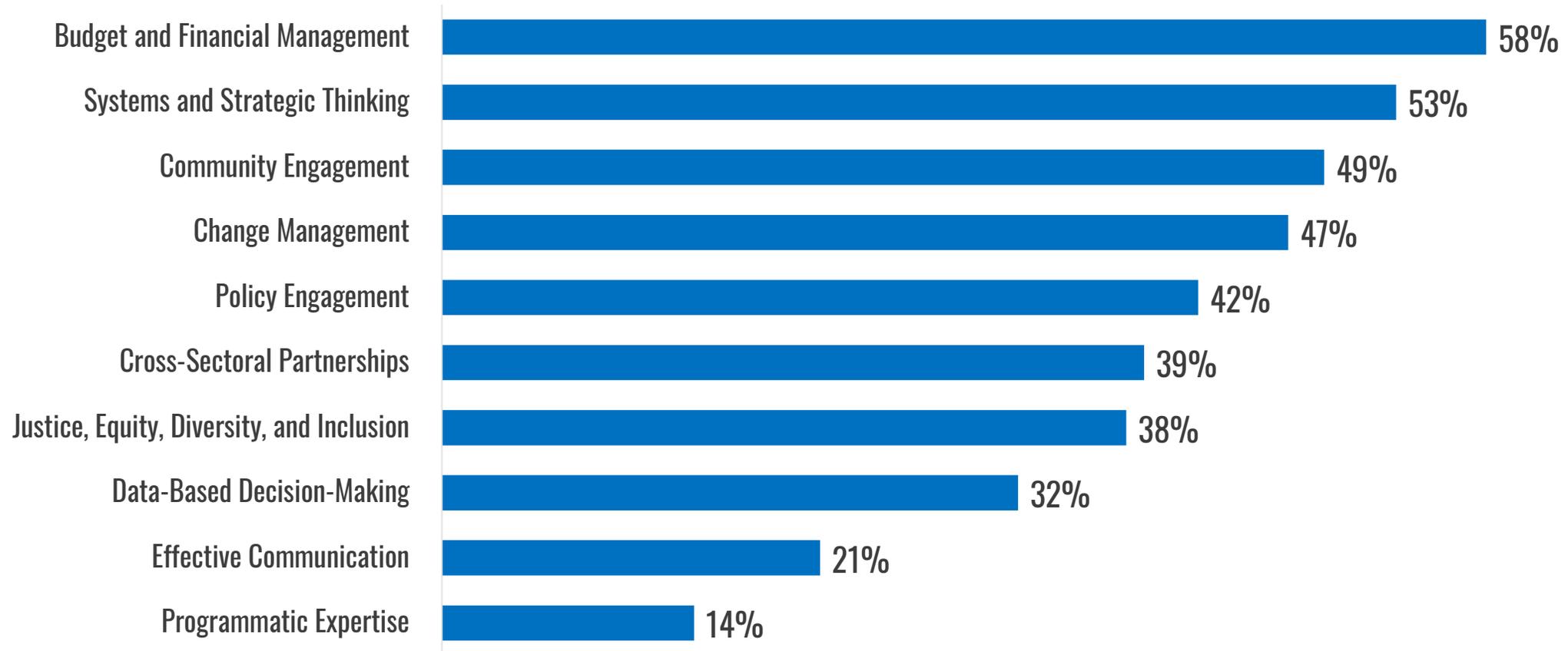
OHIO JOB ROLES BY AGENCY SIZE

SLIGHTLY MORE SMALL LHD EMPLOYEES WORK IN ADMINISTRATIVE ROLES THAN OTHER AGENCY SIZES



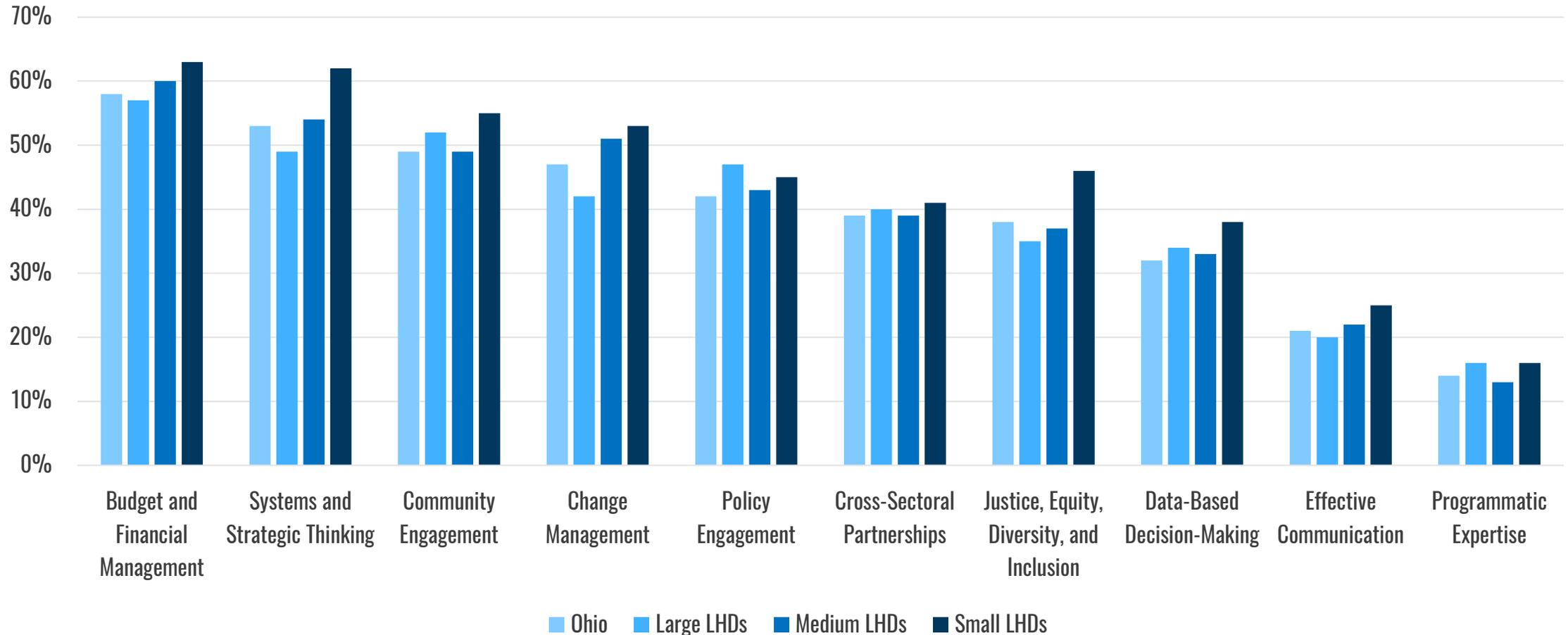
OHIO TRAINING NEEDS

WORKERS IN REGION V REPORT A NEED FOR TRAINING ON SKILLS THAT ARE CRITICAL TO ADDRESSING PUBLIC HEALTH CHALLENGES NOW AND IN THE FUTURE.



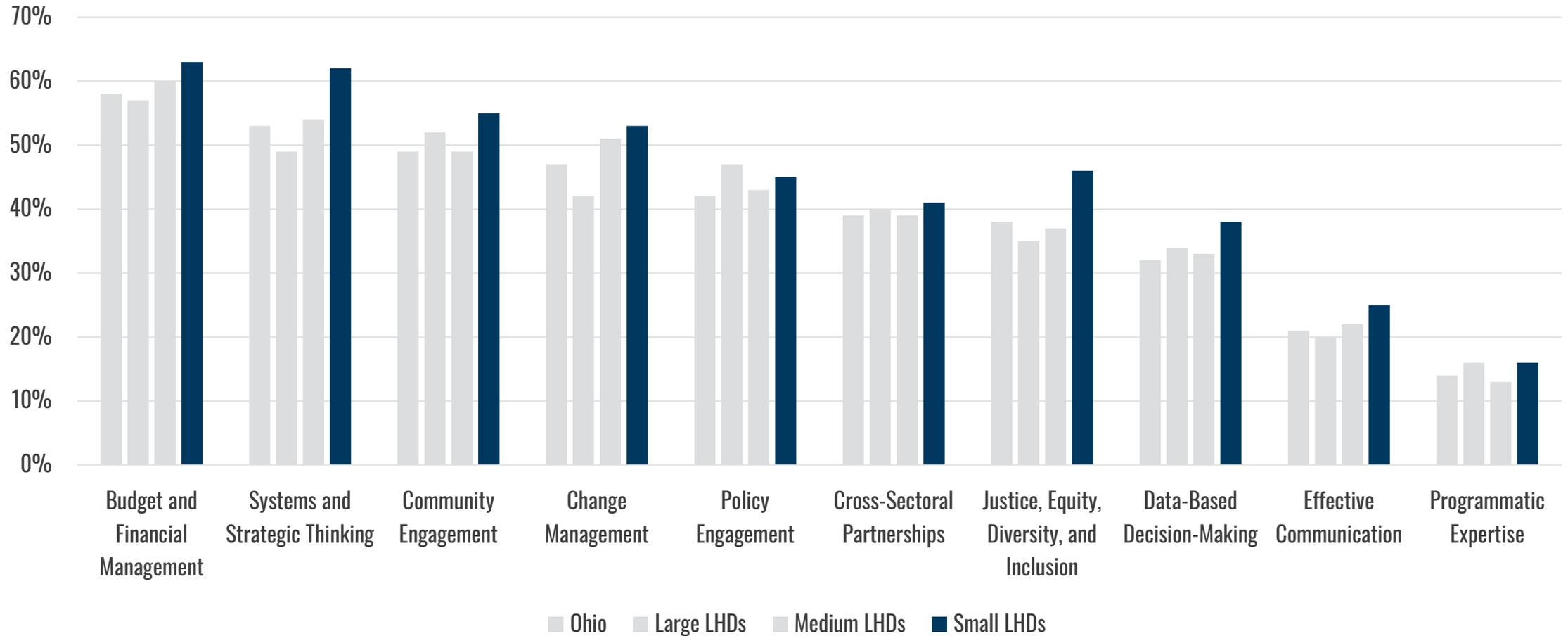
OHIO TRAINING NEEDS BY AGENCY SIZE

SMALL LHDS IN REGION V HAVE A DEEPER NEED FOR TRAINING IN EVERY STRATEGIC SKILL



OHIO TRAINING NEEDS BY AGENCY SIZE

SMALL LHDS IN REGION V HAVE A DEEPER NEED FOR TRAINING IN EVERY STRATEGIC SKILL

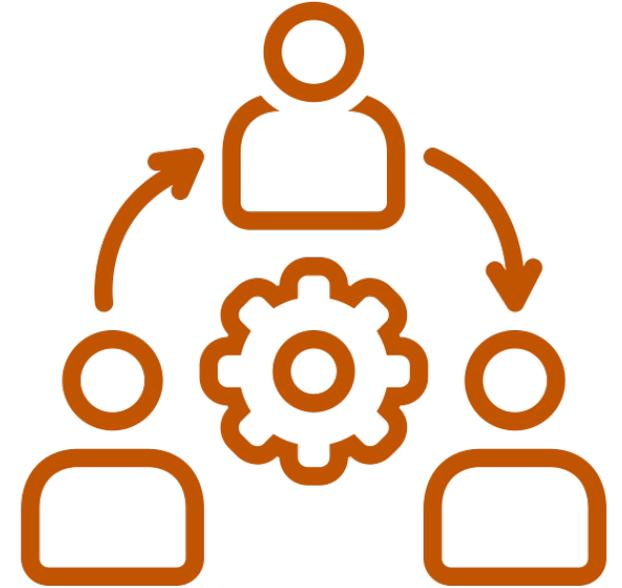


A WIDENING GAP - CONCLUSIONS

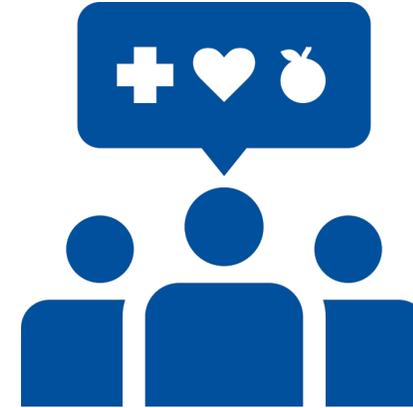
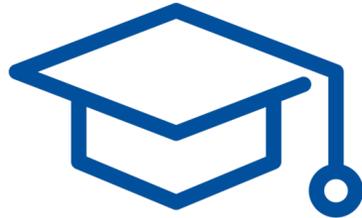
1. Small and Medium LHDs have the smallest proportion of employees self-reporting their race and ethnicity as BIPOC (12% and 11% respectively).
2. Small LHDs have the lowest percentage of employees with advanced degrees with less than 20% of workers reporting a masters or doctorate.
3. Employees in small LHDs predominantly work in communicable disease and employees in medium LHDs predominantly work in maternal and child health.
4. Employees in small LHDs report a deeper need for training across all strategic skills assessed.

UTILIZING THESE DATA FOR CHANGE

Center principles of justice, diversity, equity, inclusion, and belonging in hiring and retention practices to increase the diversity of staff hired.



UTILIZING THESE DATA FOR CHANGE



Expand the public health pipeline by engaging with students at different stages of their education to introduce them to public health as a field.

UTILIZING THESE DATA FOR CHANGE

Leverage partnerships with Public Health Training Centers and the Ohio Center for Public Health Excellence to meet the unique training needs of the public health workforce in Ohio.



GROUP REFLECTION

- What other implications do you see for having access to all this data in Ohio?
- Do you see similar challenges with your own work or the work of your organization?
- Are there other opportunities to leverage these data for change?



DASHBOARD DEMONSTRATION

PH WINS DASHBOARDS



DEMOGRAPHICS



TRAINING NEEDS



WORKFORCE
CHARACTERISTICS



ENGAGEMENT &
SATISFACTION



STAYING & LEAVING



WELL-BEING



HEALTH EQUITY CONCEPTS

PH WINS DATA VISUALIZATION DASHBOARDS

1. National Dashboards
2. Agency Dashboards

Topics:

- Demographics
- Workforce Characteristics
- Staying & Leaving
- Training Needs
- Engagement & Satisfaction
- Well-being

Unique ability to view the data by certain subgroups, including:

- Setting (State, Locals, Big Cities)
- Region (based on HHS Regions)
- Workforce Groups

DASHBOARD EXAMPLE

What percentage of Region V employees are considering leaving their organization in the next year?

PARTICIPATE IN PH WINS 2024!



Key Dates

- Recruitment: March – May 2024
- Preparation and Staff List Collection: June – July 2024
- Survey Administration: September – December 2024

THANK YOU!

All results, including the dashboards and summary reports, can be found at www.phwins.org.

Email us: phwins@debeaumont.org

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INTERESTS AND NEEDS SURVEY