

| 27. Public Health Workforce Development | | | | | | | | | | | | |
|---|---|---|------------|--|---|----------|--|---|--------------|---|----|--|
| Basic | | | Developing | | | Advanced | | | Leading Edge | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | |
| Strategic Direction | The NPHI's efforts to systematically assess and address gaps in the national public health workforce are limited. | | | The NPHI has identified gaps in the public health workforce that keep it from achieving its mission (e.g., lack of capacity for subnational surveillance). It is attempting to address select high-priority gaps. | | | The NPHI conducts workforce assessments in strategically selected areas and works with partners to address the most critical gaps. | | | The NPHI has a multifaceted approach to strengthening the public health workforce, including strategies to work with a range of partners to assess and fill gaps. It invests in "the pipeline" to ensure that enough people enter public health fields to meet demands. | | |
| Systems | The NPHI does not have processes for assessing workforce needs. The NPHI's efforts to address gaps is sporadic and ad hoc. | | | The NPHI identifies gaps in the public health workforce based on individual experiences (e.g., difficulties in getting surveillance forms completed at subnational levels). Once gaps are identified, the NPHI attempts to address them (e.g., training for district surveillance officers), but these efforts are often not systematic. | | | The NPHI uses well-established processes to assess public health workforce capacity in strategically selected areas, such as emergency response. The NPHI develops processes to address identified gaps, including systematically training key individuals and providing supervision. | | | The NPHI works closely with partners to systematically assess workforce needs in a range of areas and address gaps. The NPHI has established agreements with national or subnational level organizations (e.g., to ensure that many new public health graduates have field experiences during training). | | |
| Resources | The NPHI has limited funding for broad workforce assessment or development efforts. | | | Resources are adequate for the NPHI to identify and address gaps in some high-priority areas. | | | Resources are adequate for the NPHI to support a range of workforce assessment and development activities. It has workforce and training specialists on staff, but these are not sufficient for the NPHI's needs. The NPHI uses technology to increase the reach and effectiveness of its recommendations and trainings. | | | Resources, including specialized training staff, allow the NPHI to provide robust workforce assessments and develop activities to address gaps. The NPHI conducts research on training and creates innovations that help it achieve its goals. The NPHI provides significant oversight of the efforts it supports. | | |
| Quality | The NPHI's knowledge of public health workforce needs is based on personal experience and anecdotal information. It rarely develops recommendations or guidelines for addressing gaps in the public health workforce. Individuals without background in training often develop the NPHI's training materials and lessons. | | | The NPHI conducts workforce assessments and develops recommendations for high-priority areas, but these are often limited in scope. NPHI staff often use materials from partners or get external help to improve quality of its trainings. | | | The NPHI conducts comprehensive assessments in high priority areas to guide its efforts to fill workforce gaps. The NPHI provides detailed recommendations for addressing identified gaps and has well-designed training materials and well-trained trainers. | | | The NPHI assesses current workforce gaps and forecasts future needs. It regularly updates its recommendations and approaches for addressing gaps, including related to diversity in background and skills. The NPHI uses technology and other developments to increase efficiency and effectiveness. Its recommendations, curricula, and training materials are used by a range of other organizations. | | |
| Engagement | The NPHI's stakeholders provide little or no input about workforce gaps or ways the NPHI can address them. | | | Some partners provide input into workforce development priorities or work in collaboration with the NPHI to fill gaps. | | | A range of stakeholders are engaged in workforce assessments, developing strategies to address workforce gaps, and conducting joint trainings and other activities. | | | Stakeholder involvement is broad and includes formal agreements that support strategically selected partners to build public health workforce capacity. | | |
| Impact | The NPHI's overall impact on the public health workforce is small. | | | The NPHI can provide examples of workforce development efforts that have had a measurable impact on trainee knowledge, but the long-term impact on public health practice is unknown. | | | The NPHI's assessments of workforce gaps informs its programs and those of others. Training and other approaches are addressing public health workforce needs. | | | The NPHI and its partners have substantially enhanced the public health workforce, including building workforce diversity. The NPHI can demonstrate that its workforce development efforts have had a positive impact on public health practice. | | |

The [Staged Development Tool \(SDT\)](#) for NPHIs was developed by the [U.S. Centers for Disease Control and Prevention \(CDC\)](#) and the [International Association of National Public Health Institutes \(IANPHI\)](#) with the assistance of a consultative group of National Public Health Institute (NPHI) leaders from around the world.