

Staff Training Needs Assessment Bloomington Public Health

Purpose

The purpose of this assessment is to determine the training needs for Bloomington Public Health staff and leadership. The assessment is composed of two key collection parts, a staff core competency assessment and a competency prioritization process conducted by agency leadership. It is the combination of these two assessments which determines the overall training needs of Bloomington Public Health employees.

Background

In 2014, BPH chose the *Council on Linkages Core Competencies for Public Health Professionals*, as those most needed for the division's success as a public health agency. These competencies represent BPH's expectations of competent performance in public health and will be used to guide professional development and training in its workforce.

Arranged in three tiers to reflect progressive levels of responsibility (entry level; supervisors and managers; senior managers and CEO's), the Core Competencies are categorized by eight areas of practice:

- Analytical/assessment skills
- Policy development/program planning skills
- Communication skills
- Cultural competency skills
- Community dimensions of practice skills
- Public health sciences skills
- Financial planning and management skills

The *Council on Linkages Core Competencies for Public Health Professionals* are described in detail here: http://www.phf.org/resourcestools/pages/core_public_health_competencies.aspx

Methods

In 2014, in collaboration with the Minnesota Department of Health (MDH) Office of Performance Improvement (OPI), all staff were asked to complete the Council on Linkages Core Competencies for Public Health Professionals assessments. These assessments varied by tier, with front-line staff completing the tier 1 assessment, grant coordinators and program supervisors completing tier 2 and program managers and Administrators completing tier 3. While this structure differs somewhat from other agency's administration of the assessments, the tier distribution was determined adequate for BPH due to the agency's smaller size comparative to the Core Competencies intended design. Core Competencies are assessed on a 4 point scale of self-reported competency in the area, 4 being the highest level. Aggregate results of this assessment by tier and overall are attached (Appendix A).

At the same time that the Core Competency Assessment was conducted, and also through collaboration with MDH – OPI, program managers completed a prioritization of the 8 domains included in the Core Competency framework: (Appendix B). The results of the staff competency assessments and domain prioritizations were combined to determine the training needs of the agency as a whole. Assessment and prioritization analysis were conducted according to guidance from the Council on Linkages to form a Core Competency High Yield Analysis (Appendix C).

Detailed information on methods of analysis are provided by the Public Health Foundation and Council on Linkages attached (Appendix D).

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Results

Core Competency Assessment Results:

The analysis of the competency assessment and prioritization process differed by Tier and so will be assessed here by each tier. Competency assessment results are also displayed on figures in Appendix A.

Tier 1:

Tier 1 results represent frontline staff. This tier had a response rate of 79.4%. From highest competency to lowest competency, the results are as follows:

Domain (average competency rating)

1. Cultural Competency (2.90)
2. Communication (2.48)
3. Leadership and Systems Thinking (2.44)
4. Community Dimensions of Practice (2.42)
5. Analytical Assessment (2.37)
6. Public Health Sciences (2.24)
7. Policy Development/Program Planning (2.21)
8. Financial Planning and Management (2.07)

Tier 2:

Tier 2 results represent coordinators and supervisors. This tier had a response rate of 87.5%. From highest competency to lowest competency, the results are as follows:

Domain (average competency rating)

1. Cultural Competency (3.07)
2. Public Health Sciences (2.83)
3. Leadership and Systems Thinking (2.82)
4. Analytical Assessment (2.76)
5. Communication (2.64)
6. Community Dimensions of Practice (2.51)
7. Policy Development/Program Planning (2.39)
8. Financial Planning and Management Skills (2.20)

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Tier 3:

Tier 3 results represent program managers and administrators. This tier had a response rate of 100%. From highest competency to lowest competency, the results are as follows:

Domain (average competency rating)

1. Leadership and Systems Thinking (3.17)
2. Communication (3.16)
3. Community Dimensions of Practice (3.01)
4. Analytical Assessment (2.96)
5. Cultural Competency (2.96)
6. Financial Planning and Management (2.91)
7. Policy Development/Program Planning (2.90)
8. Public Health Sciences (2.57)

Tiers Average:

The following results represent the average competency rating of all three tiers. From highest competency to lowest competency, the results are as follows:

Domain (average competency rating)

1. Cultural Competency (2.98)
2. Communication (2.90)
3. Leadership and Systems Thinking (2.81)
4. Analytical Assessment (2.70)
5. Community Dimensions of Practice (2.65)
6. Public Health Sciences (2.55)
7. Policy Development/Program Planning (2.50)
8. Financial Planning and Management (2.39)

Domain Prioritization Results:

The following domain prioritizations were determined through a systematic process by program managers and administrators. From highest priority to lowest priority, the results are as follows:

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

For a detailed figure of the prioritization results see Appendix B.

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High Yield Analysis Results:

The combination of the core competency analysis and domain prioritizations results in a four sector grid of training needs distribution. The first section of the grid contains higher priority areas where competency is relatively low. The second sector contains higher priority areas where competency is relatively high. The third sector contains lower priority areas where competency is relatively high. The fourth sector contains lower priority areas where competency is relatively low. Table 1 contains the combined high yield analysis for each tier as well as the aggregated results for all tiers.

Table 1:

Bloomington Public Health Core Competency High-Yield Analysis			
Matrix Key	I Develop: Higher priority areas where competency is still relatively low	II Leverage: higher priority areas where competency is relatively high	Hi
	IV De-emphasize: Lower priority areas where competency is relatively low.	III Maintain: Lower priority areas where competency is relatively high	Lo
Tier 1	Financial Planning and Management Skills	Cultural Competency Skills Communication Skills Leadership and Systems Thinking Skills	Hi
	Analytical Assessment Skills Public Health Sciences Skills Policy Development/Program Planning Skills	Community Dimensions of Practice Skills	Lo
Tier 2	Financial Planning and Management Skills	Communication Skills	Hi
	Cultural Competency Skills	Leadership and Systems Thinking Skills	
Tier 3	Public Health Sciences Skills	Community Dimensions of Practice Skills	Lo
	Policy Development/Program Planning Skills	Analytical Assessment Skills	
All Tiers	Financial Planning and Management Skills	Cultural Competency Skills Leadership and Systems Thinking Skills Communication Skills	Hi
	Community Dimensions of Practice Skills Public Health Sciences Skills Policy Development/Program Planning Skills	Analytical Assessment Skills	Lo
Lo		Hi	

Priority For Future Success

Current Competency

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Conclusions

Staff training plans will be developed based on the final result of the Core Competency High Yield analysis. As such, priorities for training will focus on those resources that will best develop higher priority areas where competency is relatively low and leverage higher priority areas where competency is relatively high. For staff at all tiers these areas include trainings focused on the following areas:

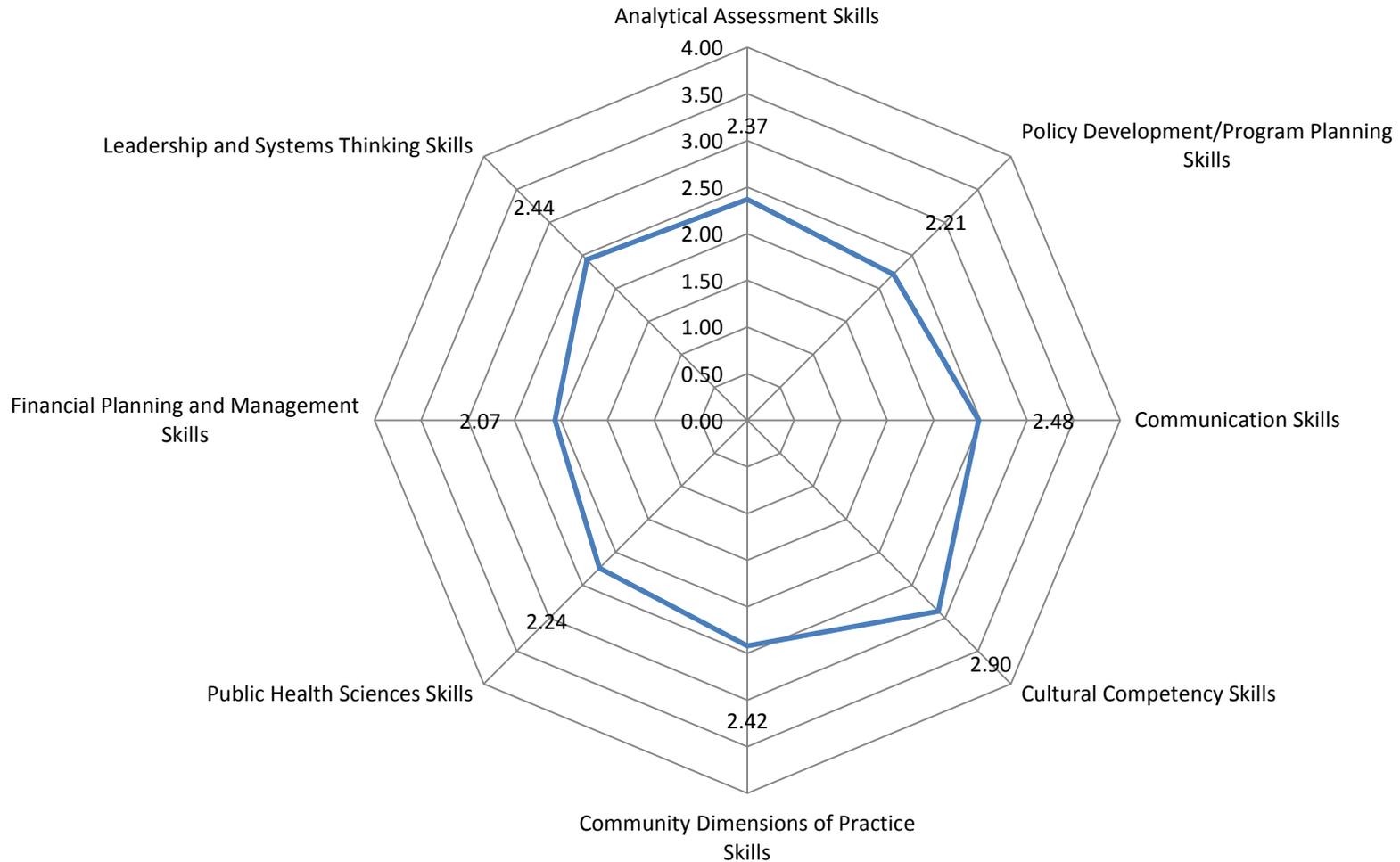
Development of Financial Planning and Management skills

Leveraging of Cultural Competency, Leadership and Systems Thinking and Communication Skills.

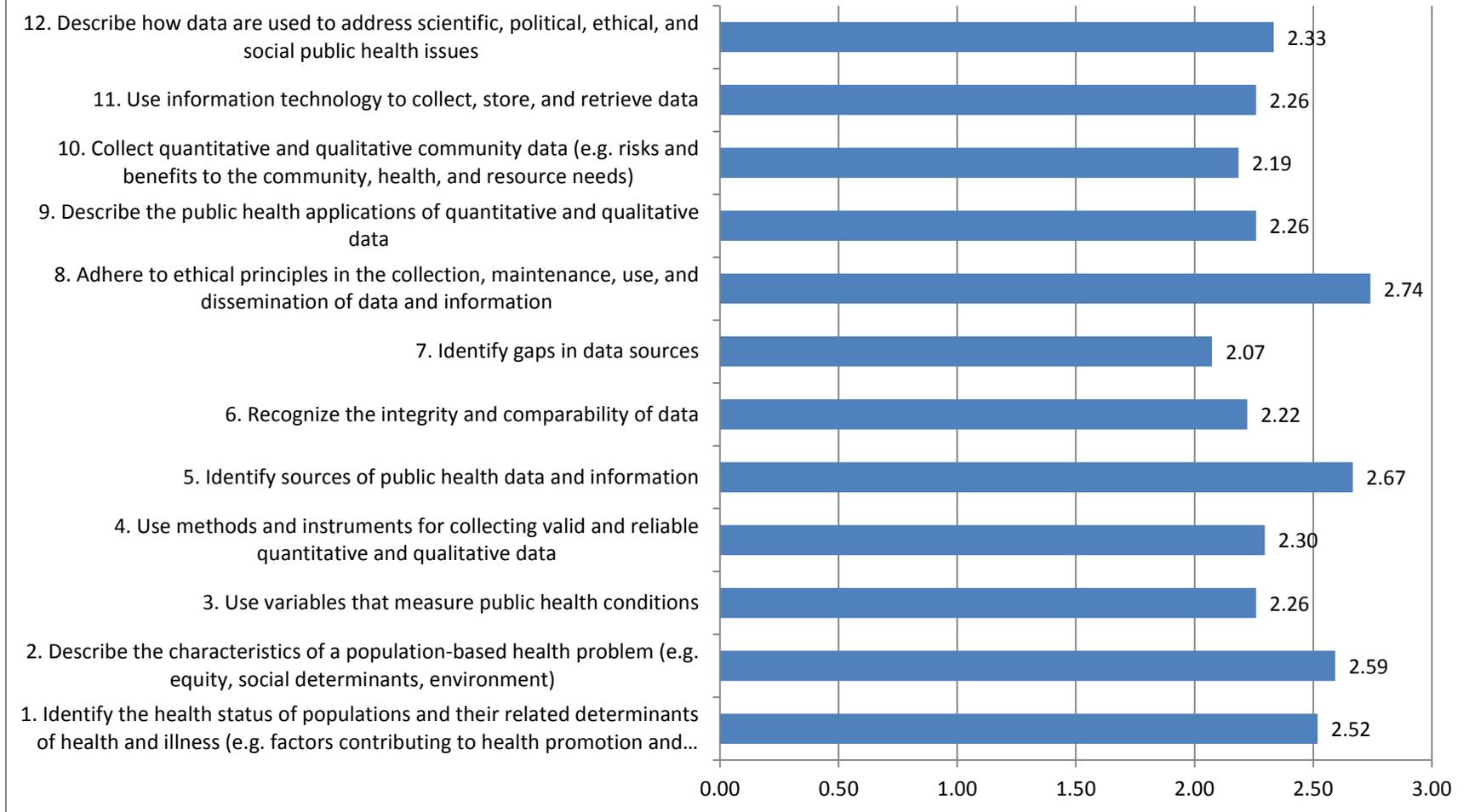
Other areas determined by the high-yield analysis to be either maintained or de-emphasized include those trainings focused on the following areas:

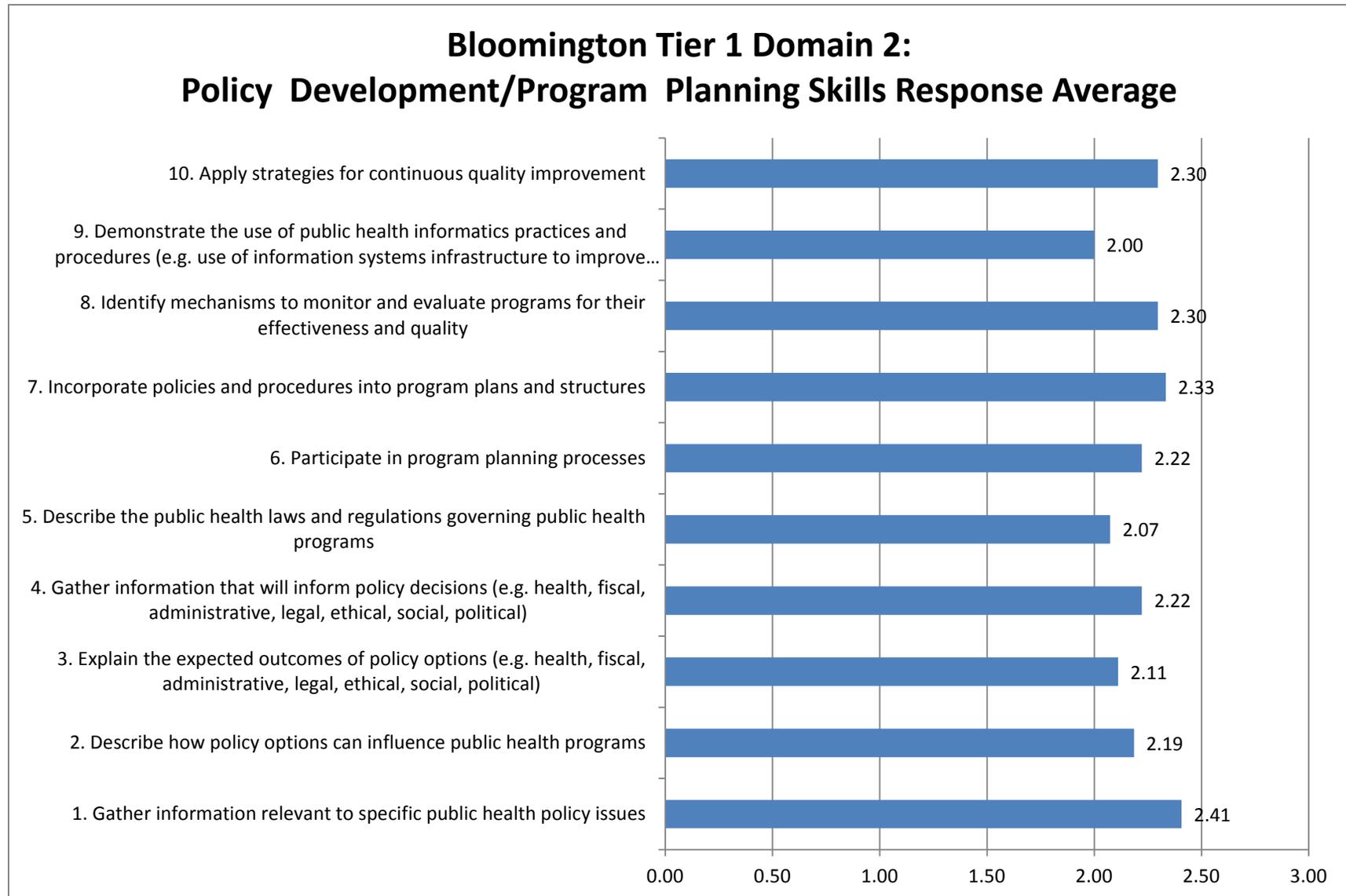
Community Dimensions of Thinking, Public Health Sciences, Policy Development/Program Planning and Analytical Assessment skills.

Bloomington Tier 1 Core Competency Assessment Domain Average

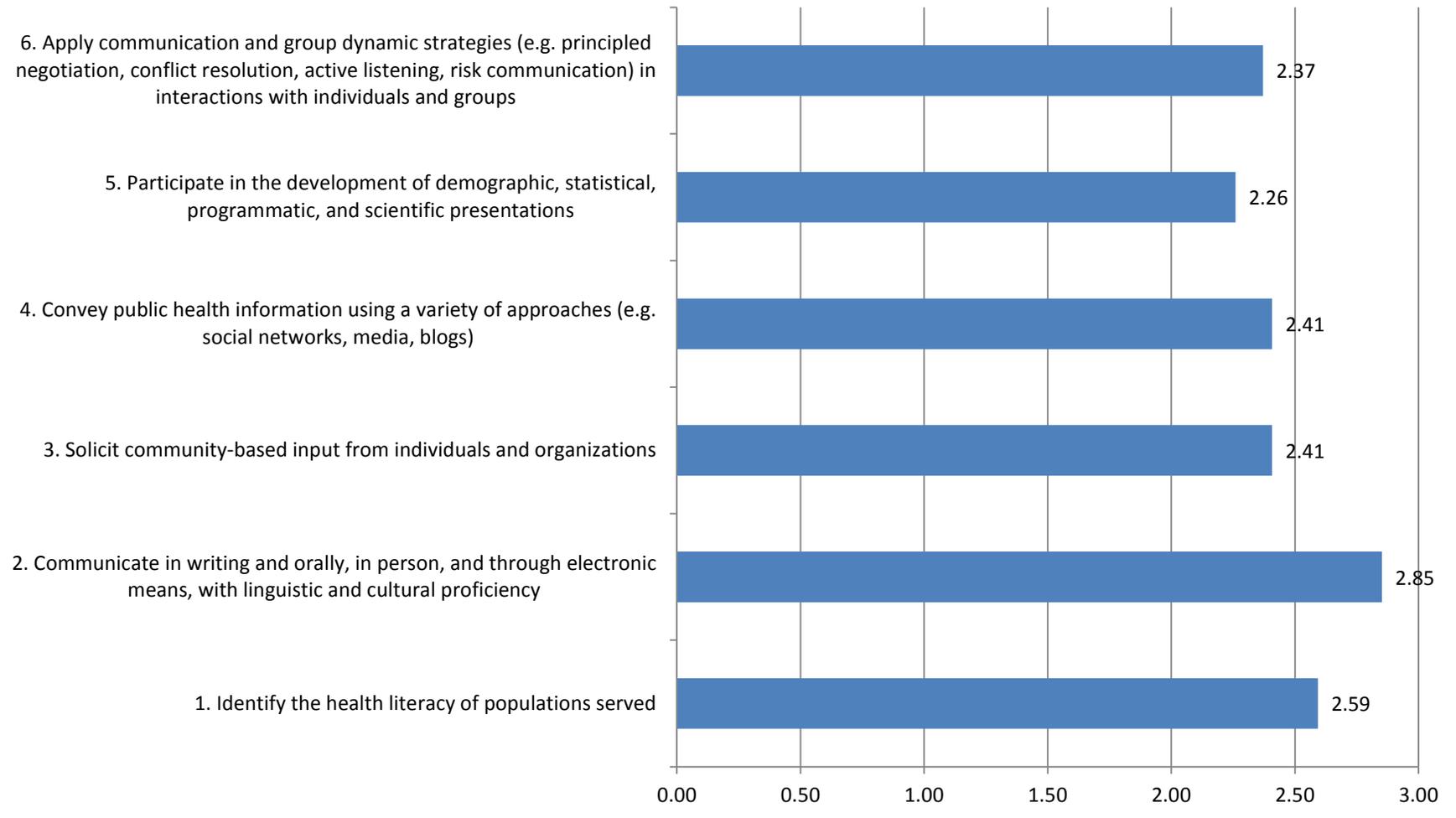


Bloomington Tier 1 Domain 1: Analytical Assessment Skills Response Average

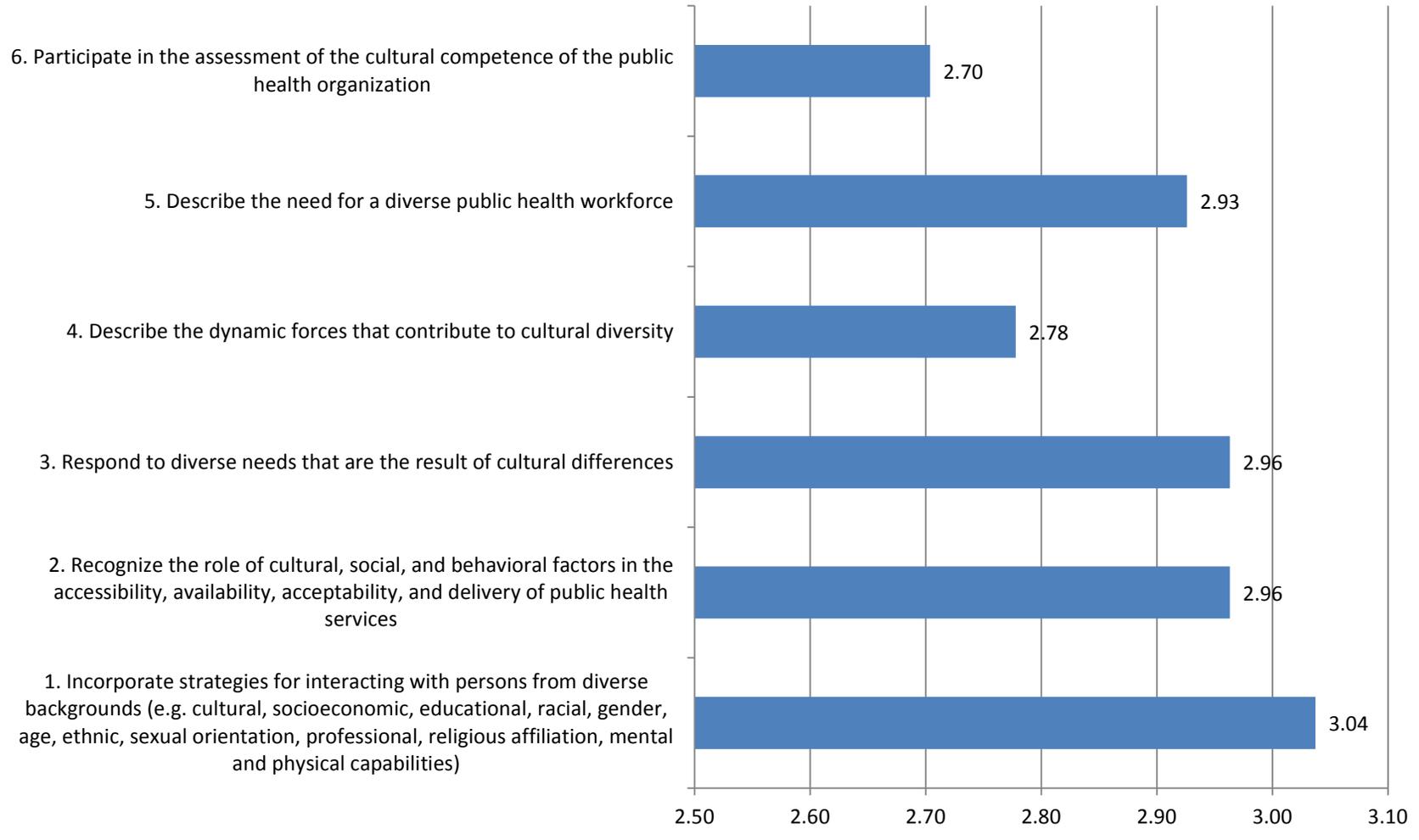




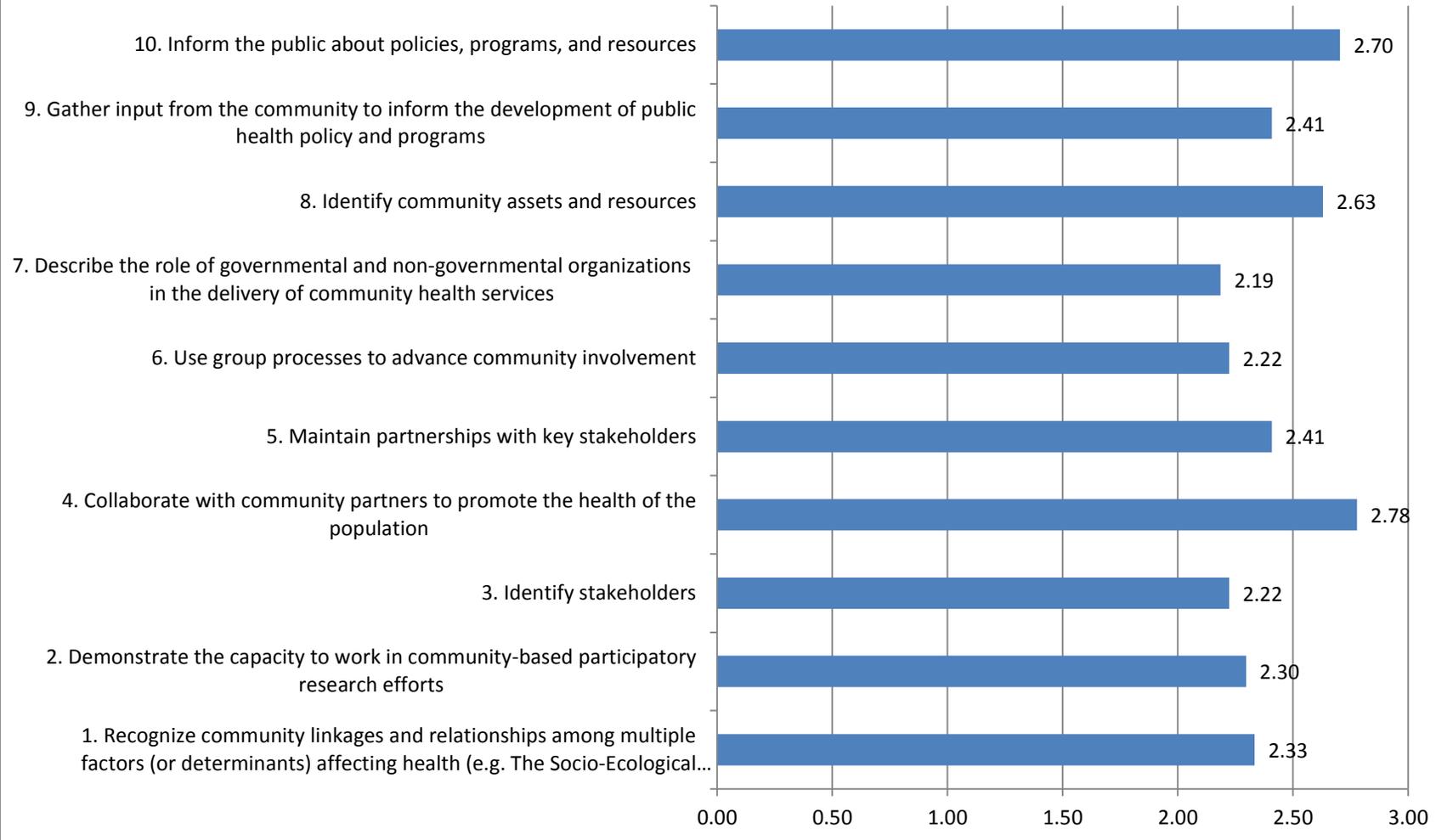
Bloomington Tier 1 Domain 3: Communication Skills Response Average



Bloomington Tier 1 Domain 4: Cultural Competency Skills Response Average



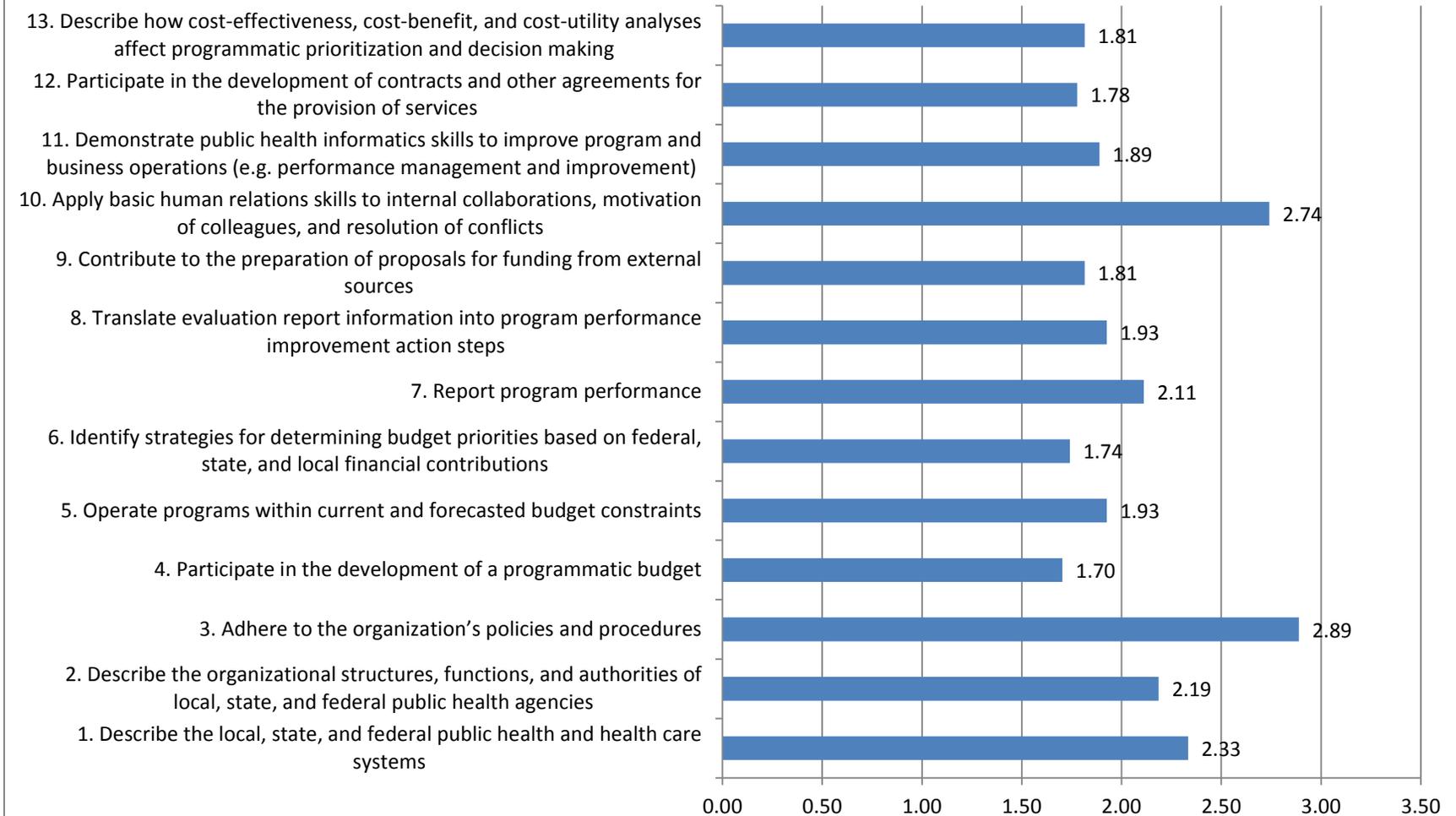
Bloomington Tier 1 Domain 5: Community Dimensions of Practice Skills Response Average



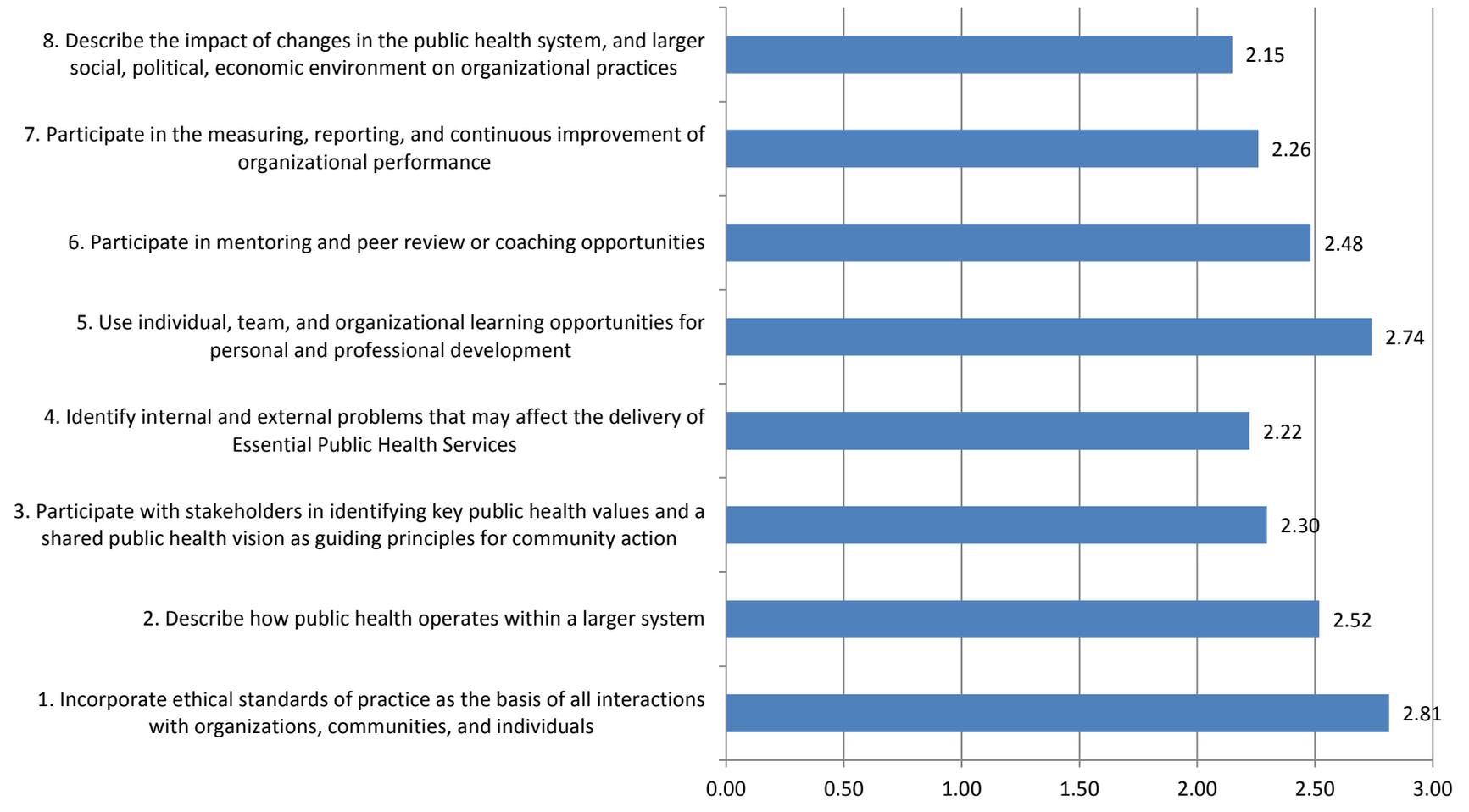
Bloomington Tier 1 Domain 6: Public Health Science Skills Response Average



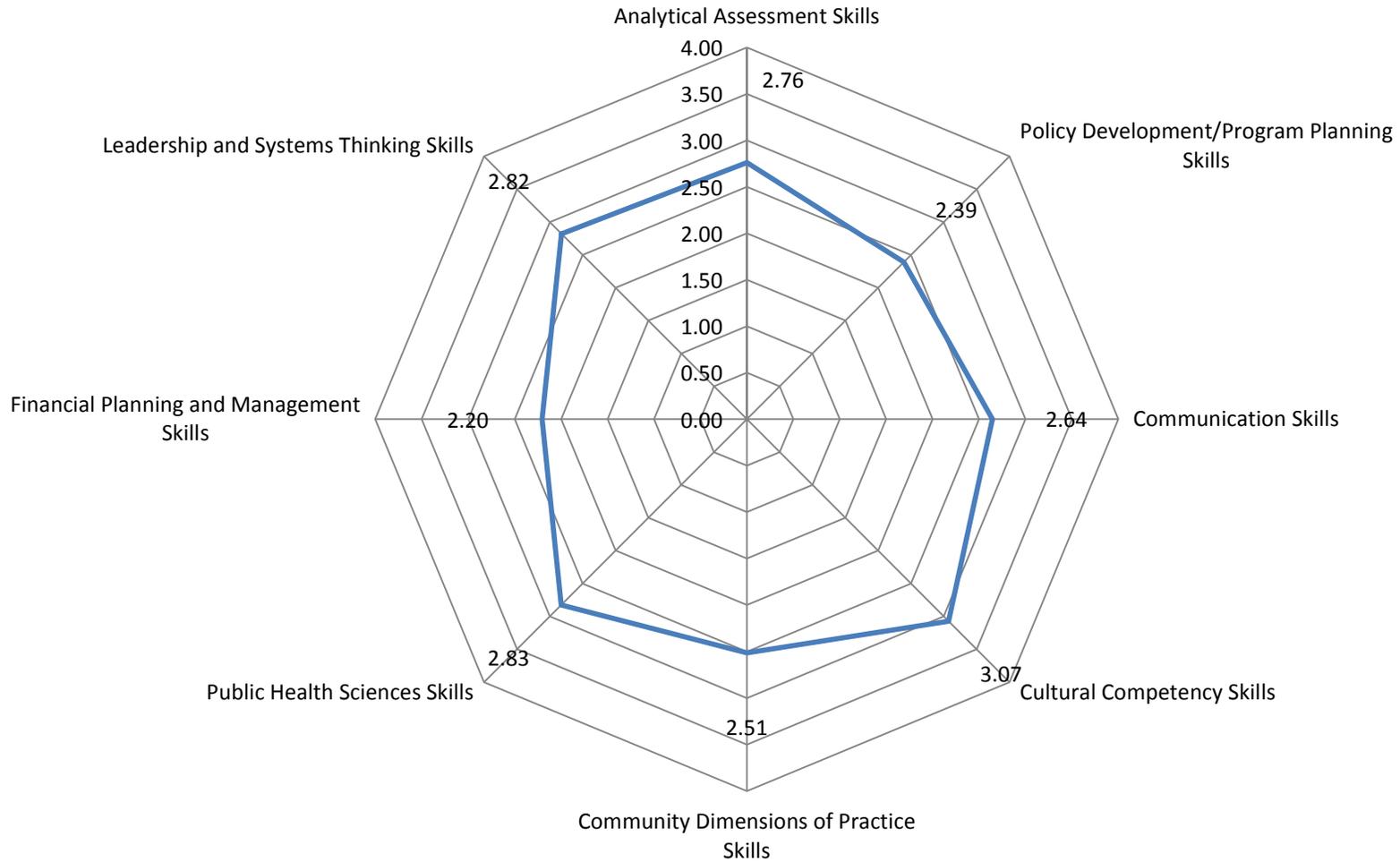
Bloomington Tier 1 Domain 7: Financial Planning and Management Skills Response Average



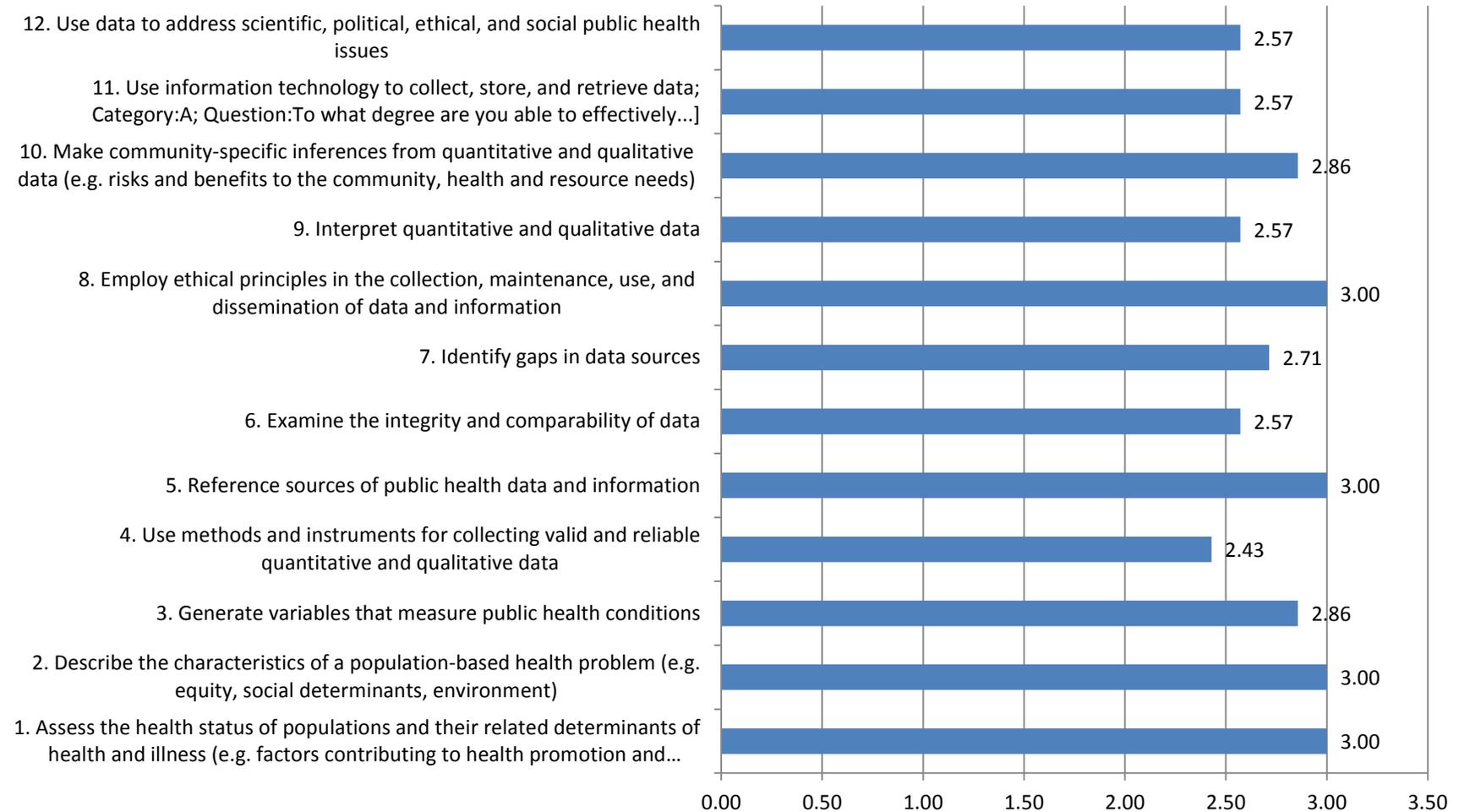
Bloomington Tier 1 Domain 8: Leadership Systems Thinking Skills Response Average



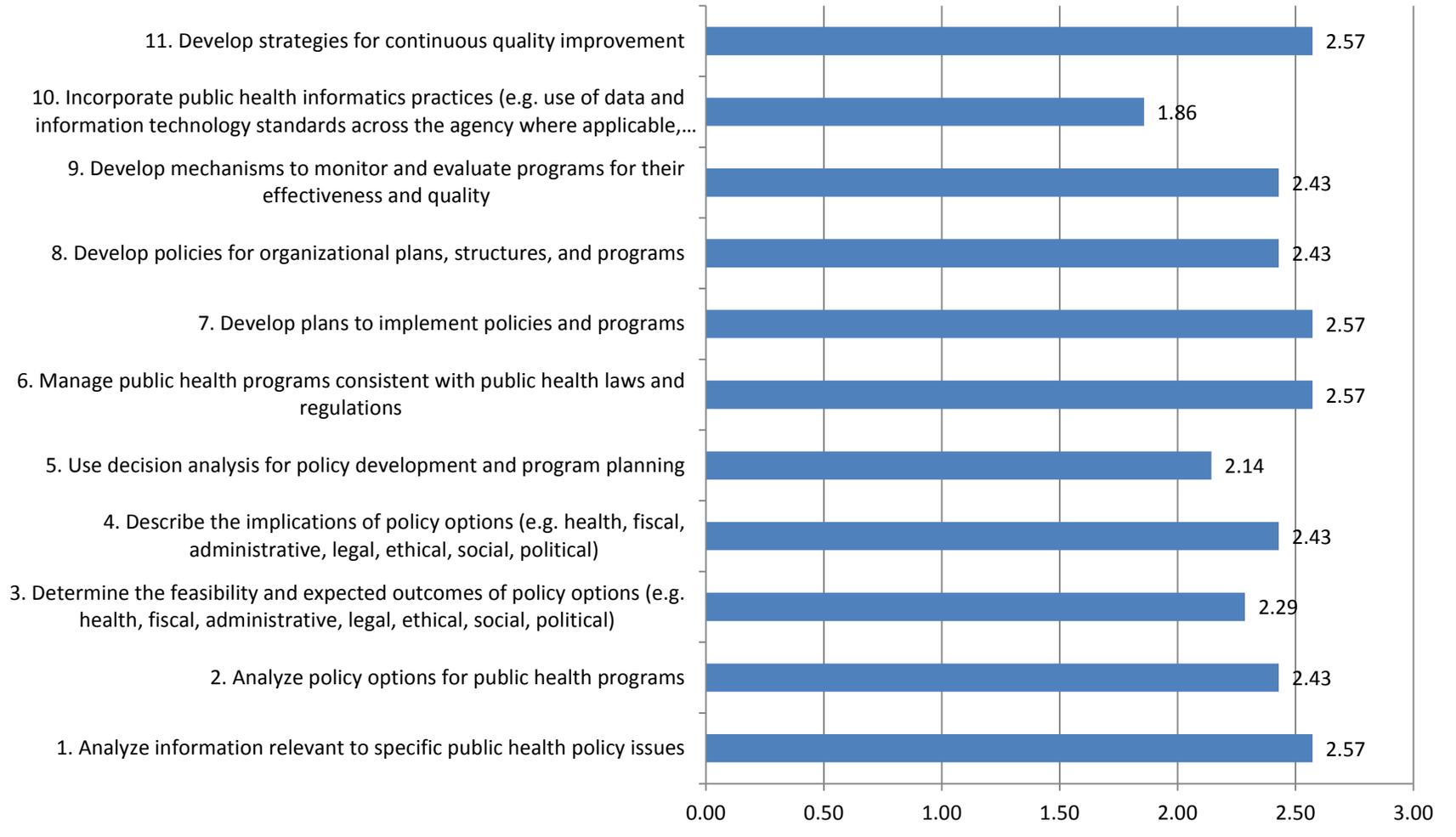
Bloomington Tier 2 Core Competency Assessment Domain Average



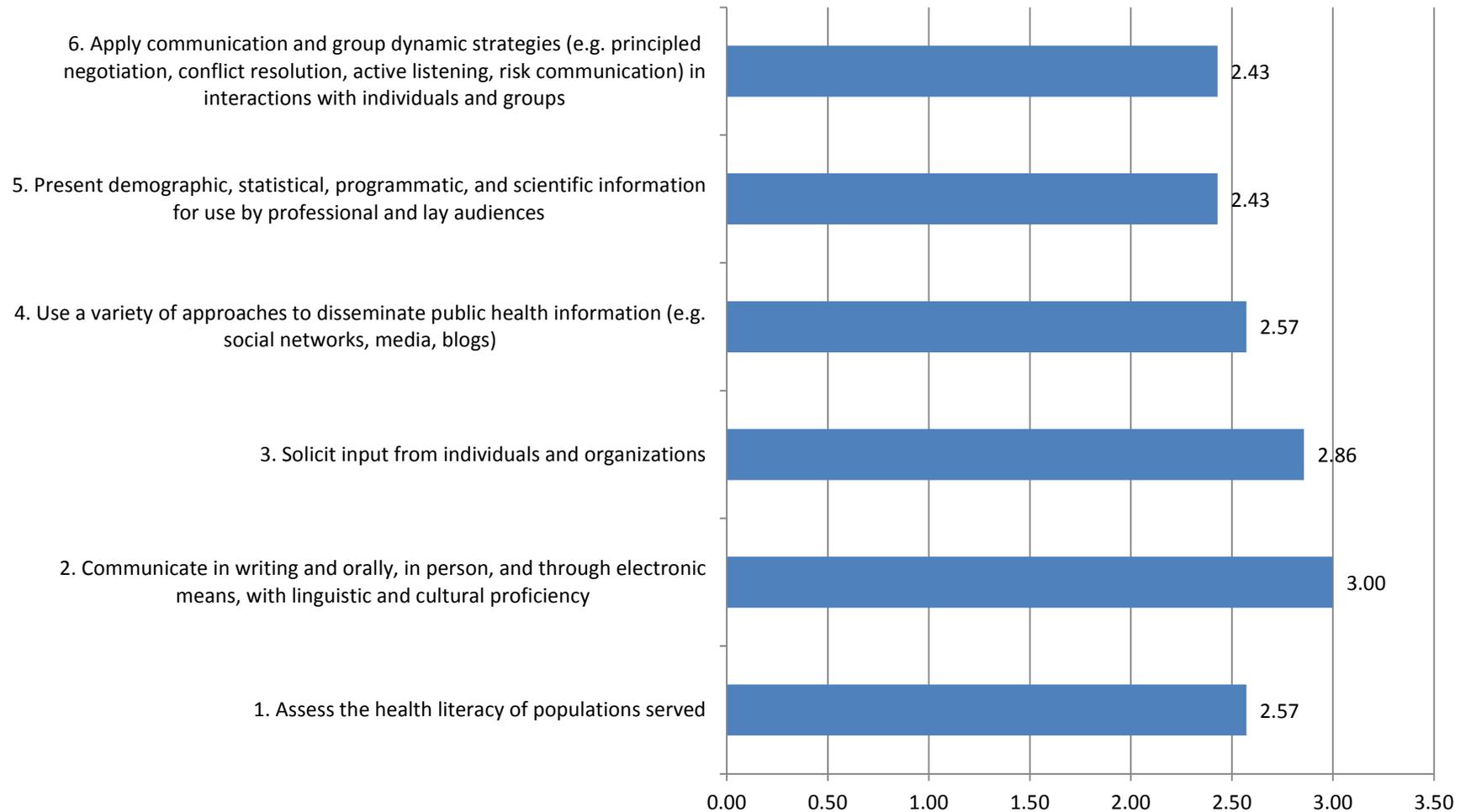
Bloomington Tier 2 Domain 1: Analytical Assessment Skills Response Average



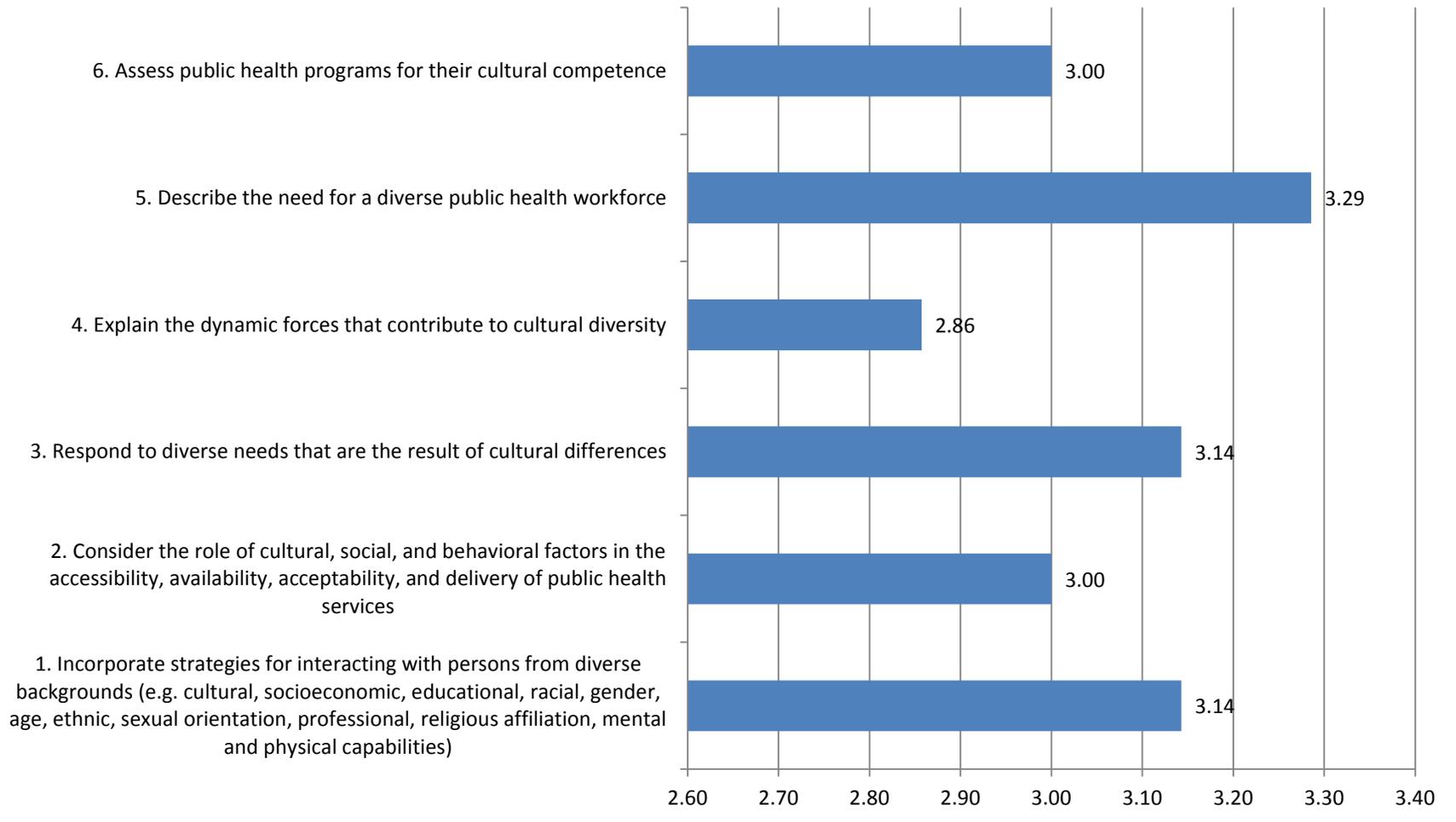
Bloomington Tier 2 Domain 2: Policy Development/ Program Planning Skills Response Average



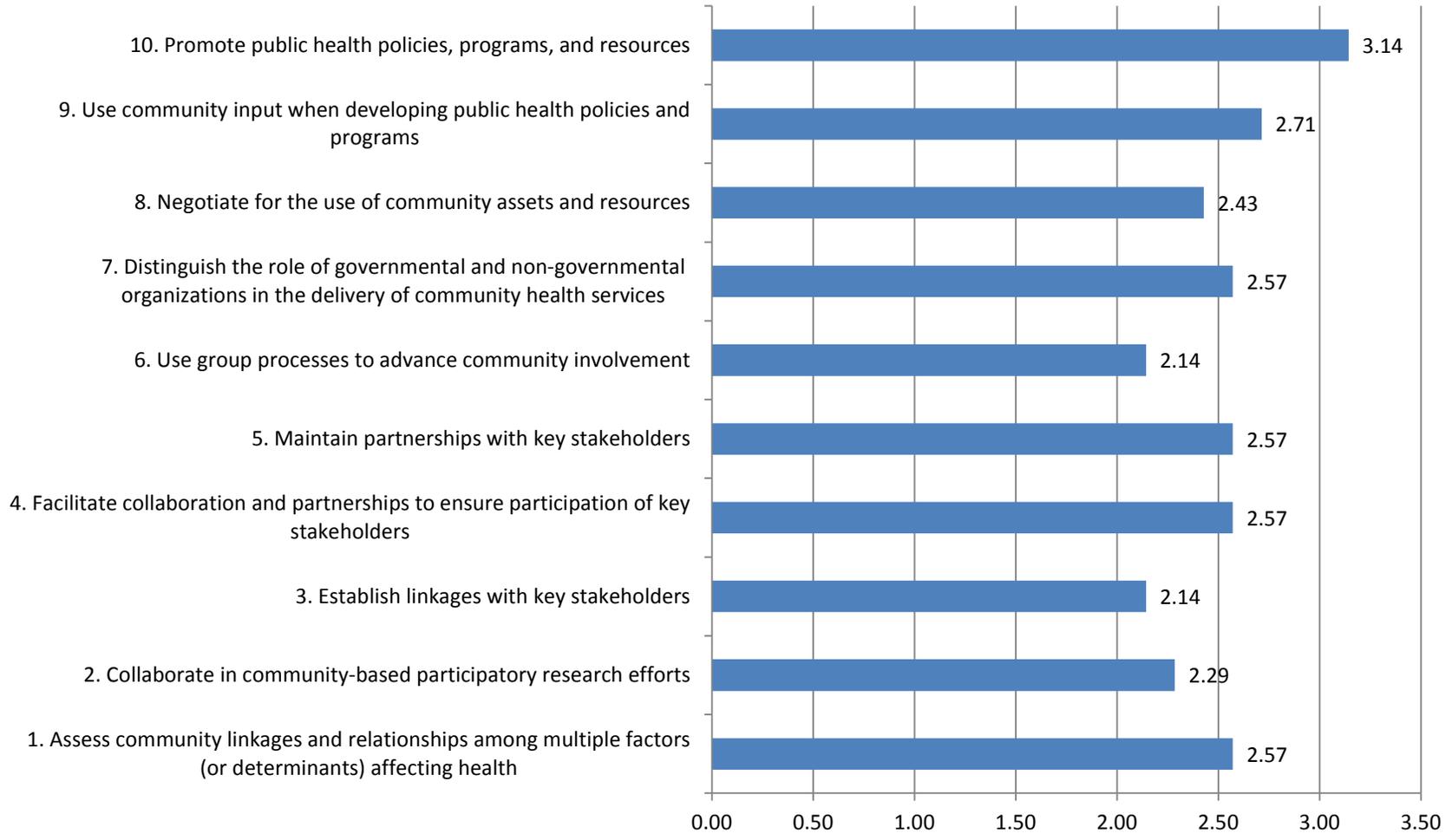
Bloomington Tier 2 Domain 3: Communication Skills Response Average



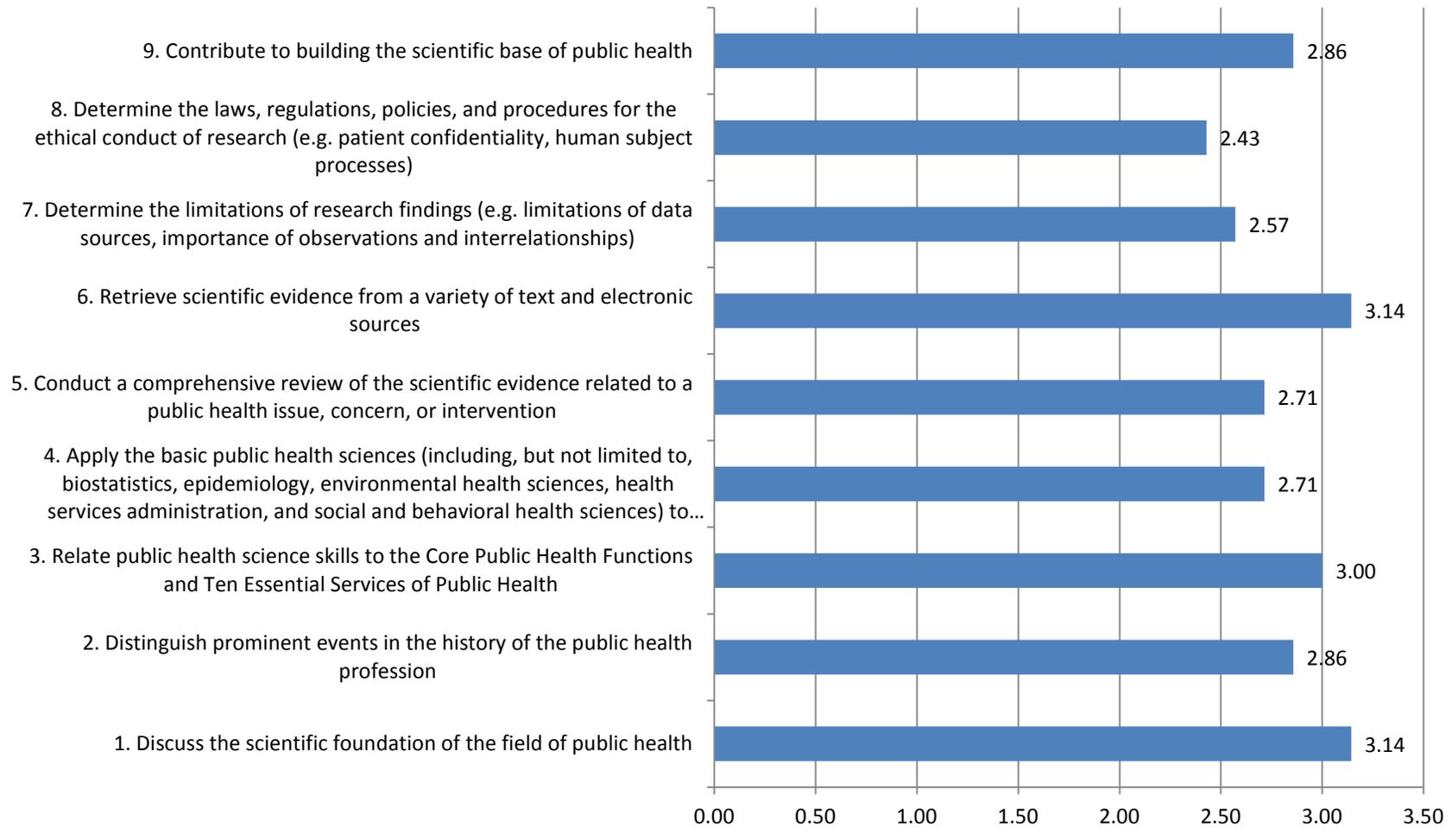
Bloomington Tier 2 Domain 4: Cultural Competency Skills Response Average



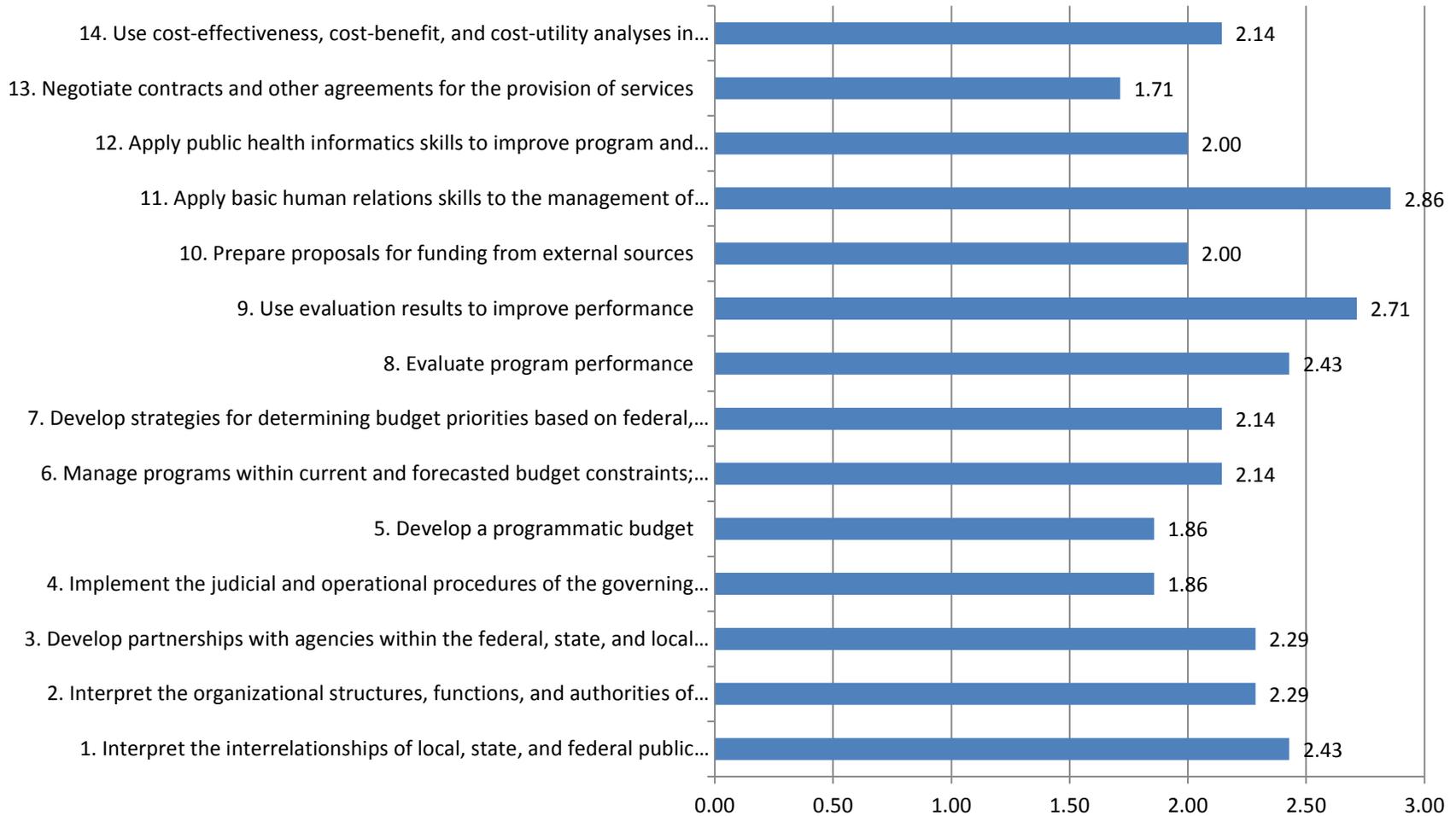
Bloomington Tier 2 Domain 5: Community Dimensions of Practice Skills Response Average



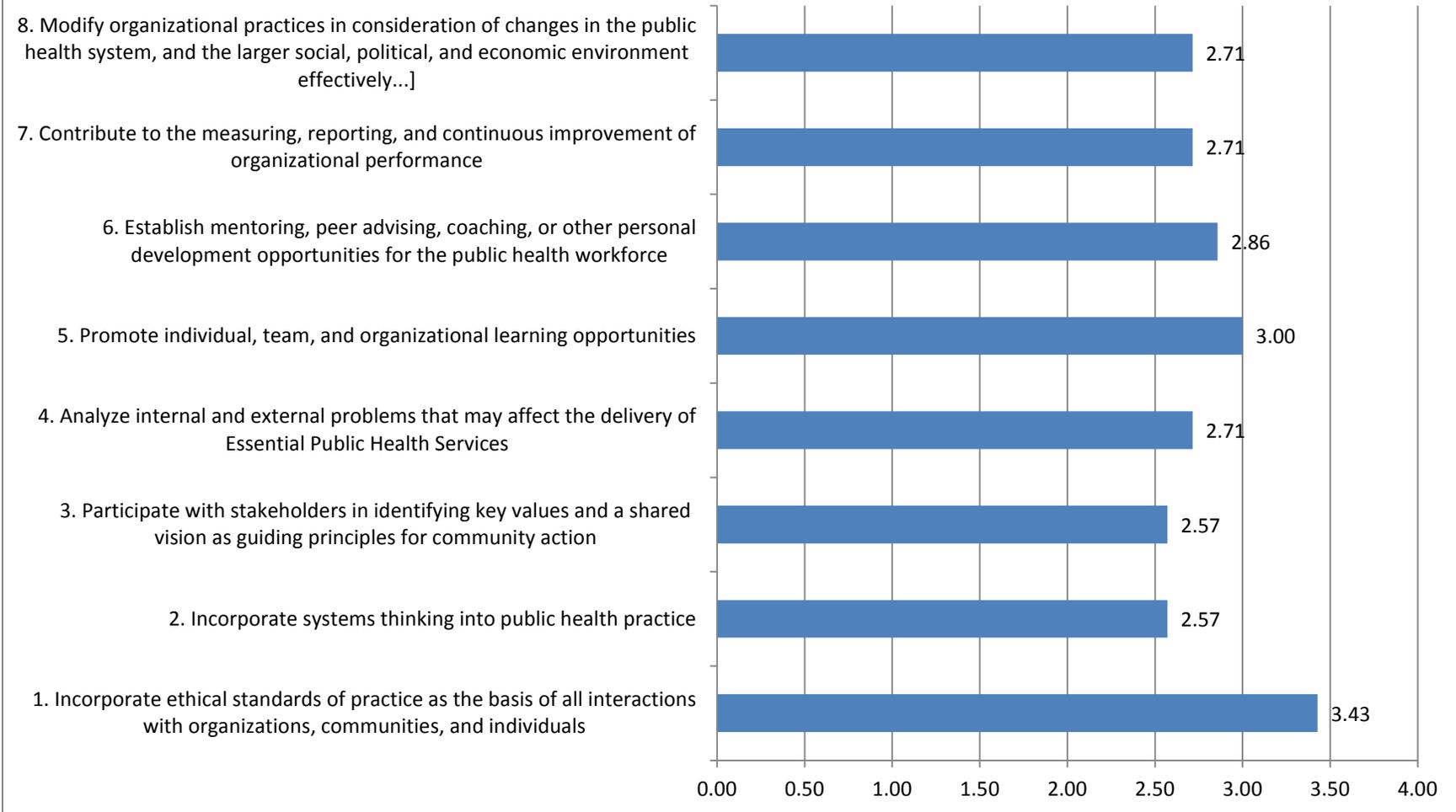
Bloomington Tier 2 Domain 6: Public Health Science Skills Response Average



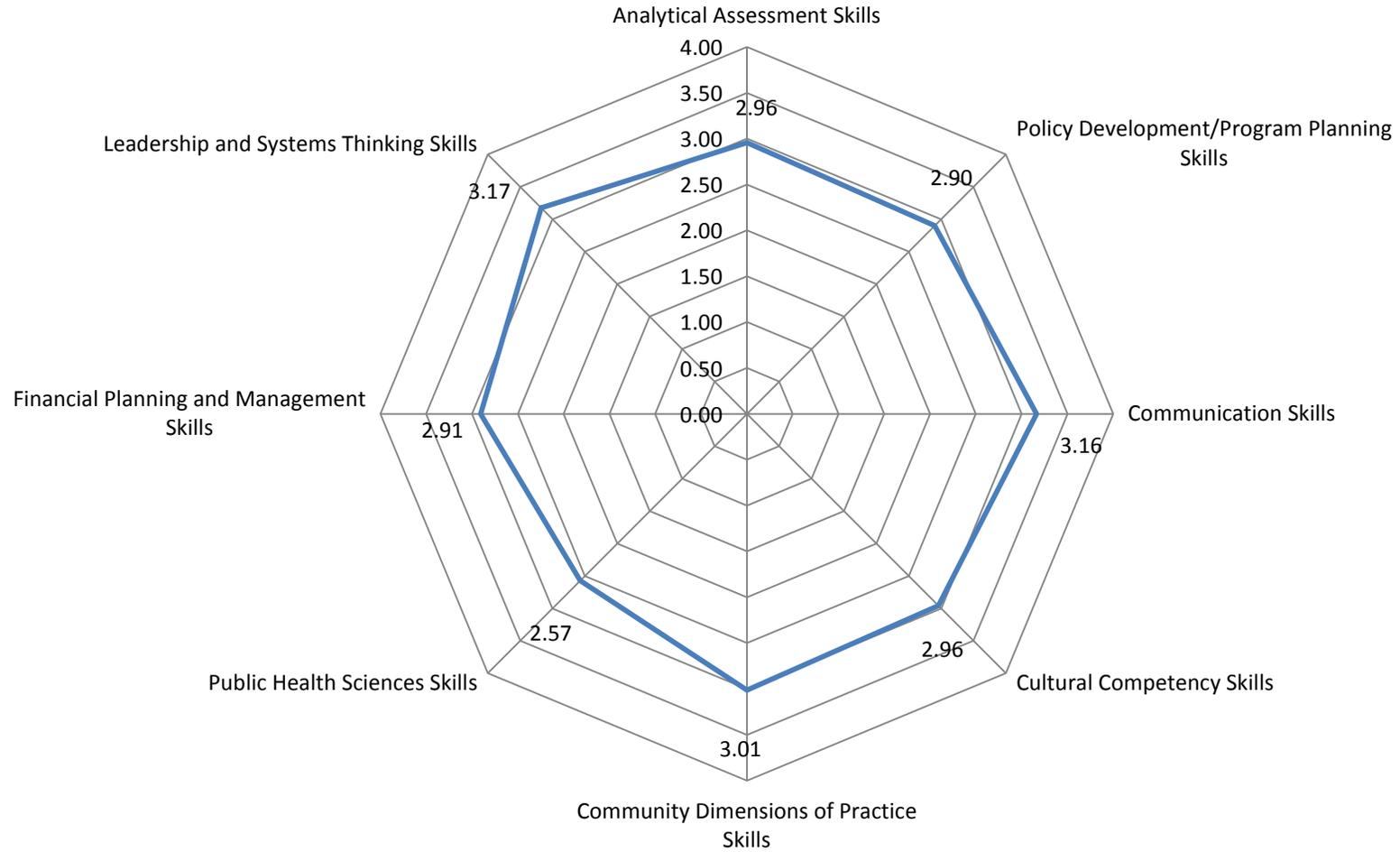
Bloomington Tier 2 Domain 7: Financial Planning and Management Skills Response Average



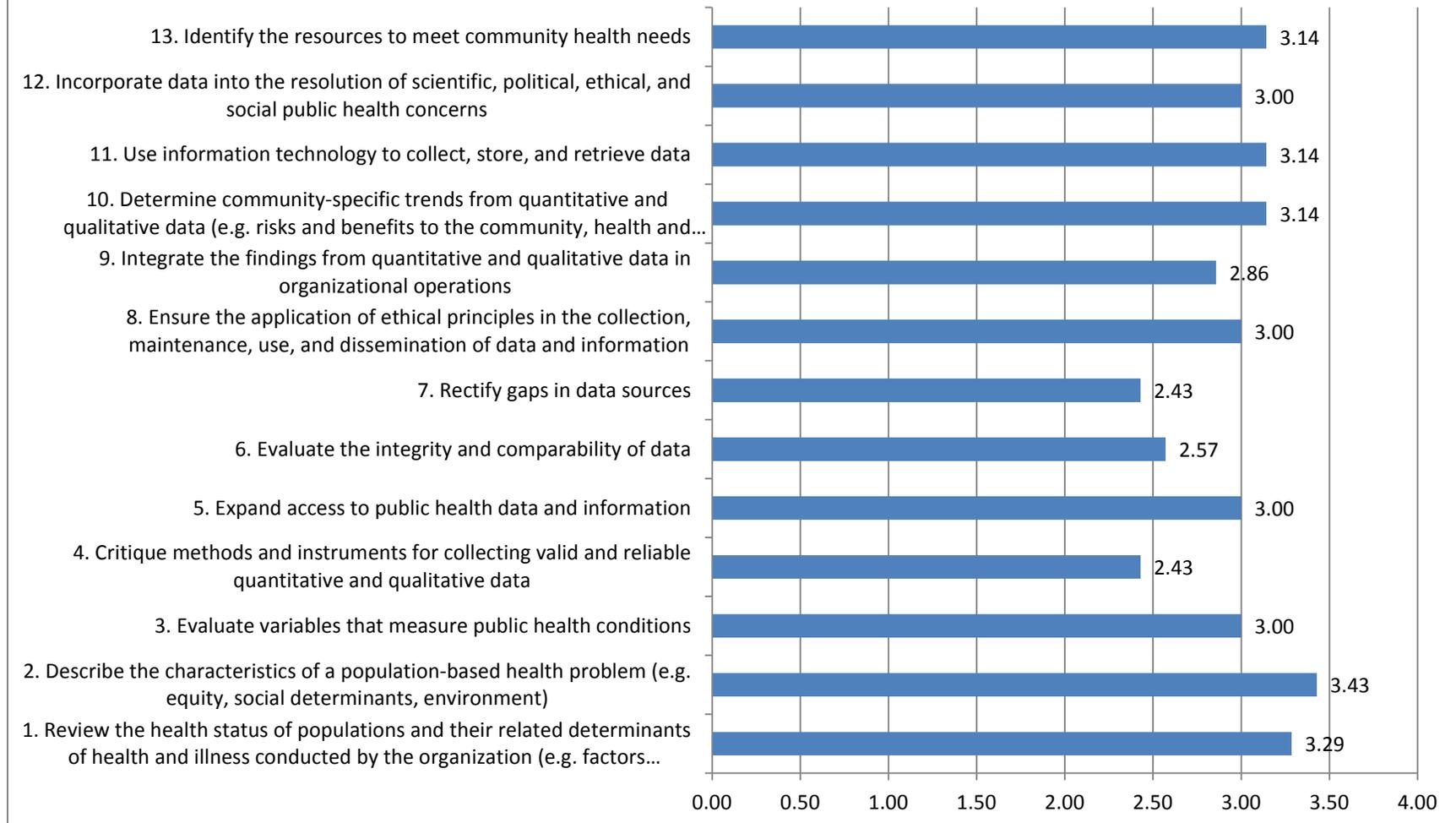
Bloomington Tier 2 Domain 8: Leadership and Systems Thinking Skills Response Average



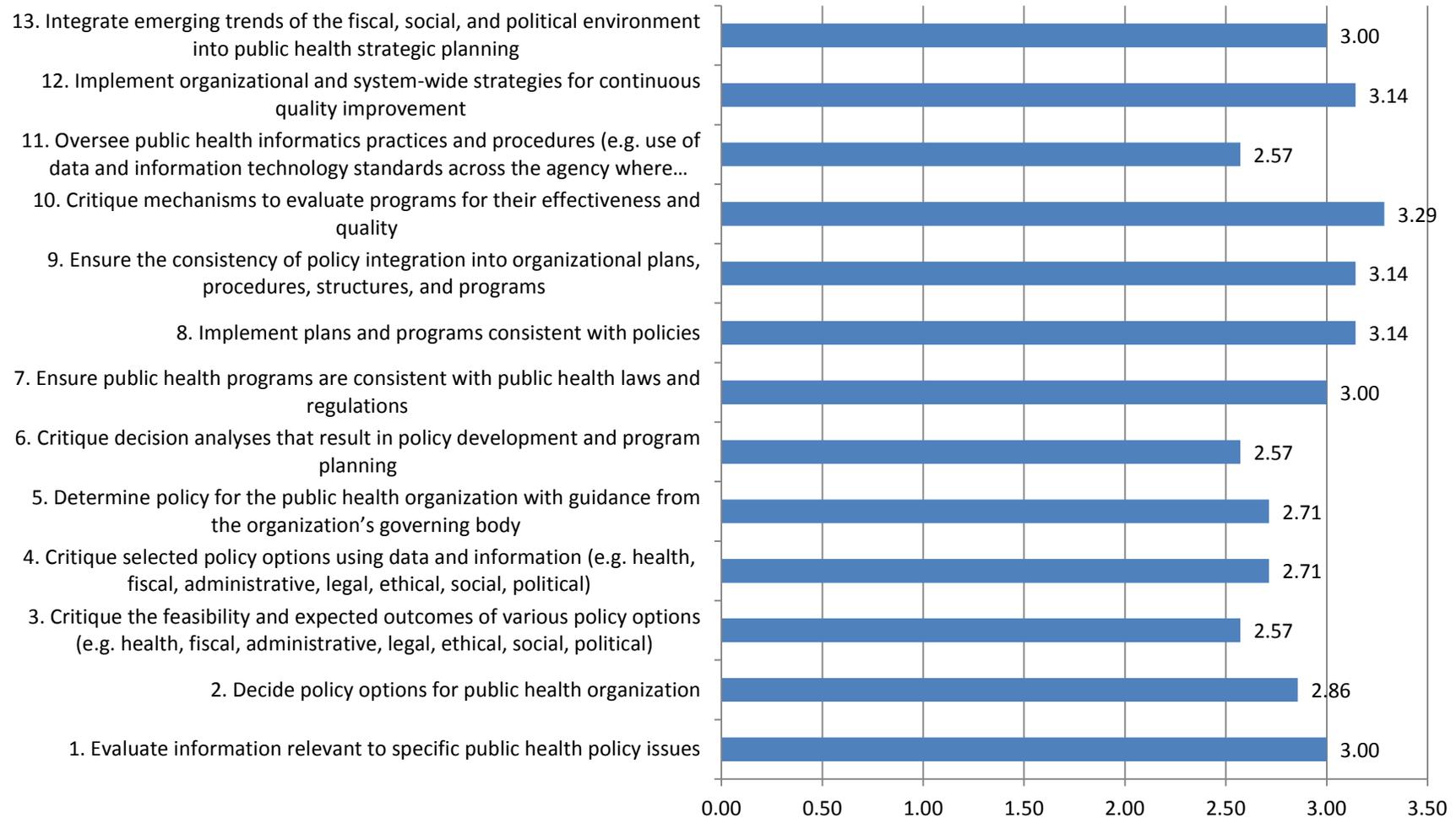
Bloomington Tier 3 Core Competency Assessment Domain Average



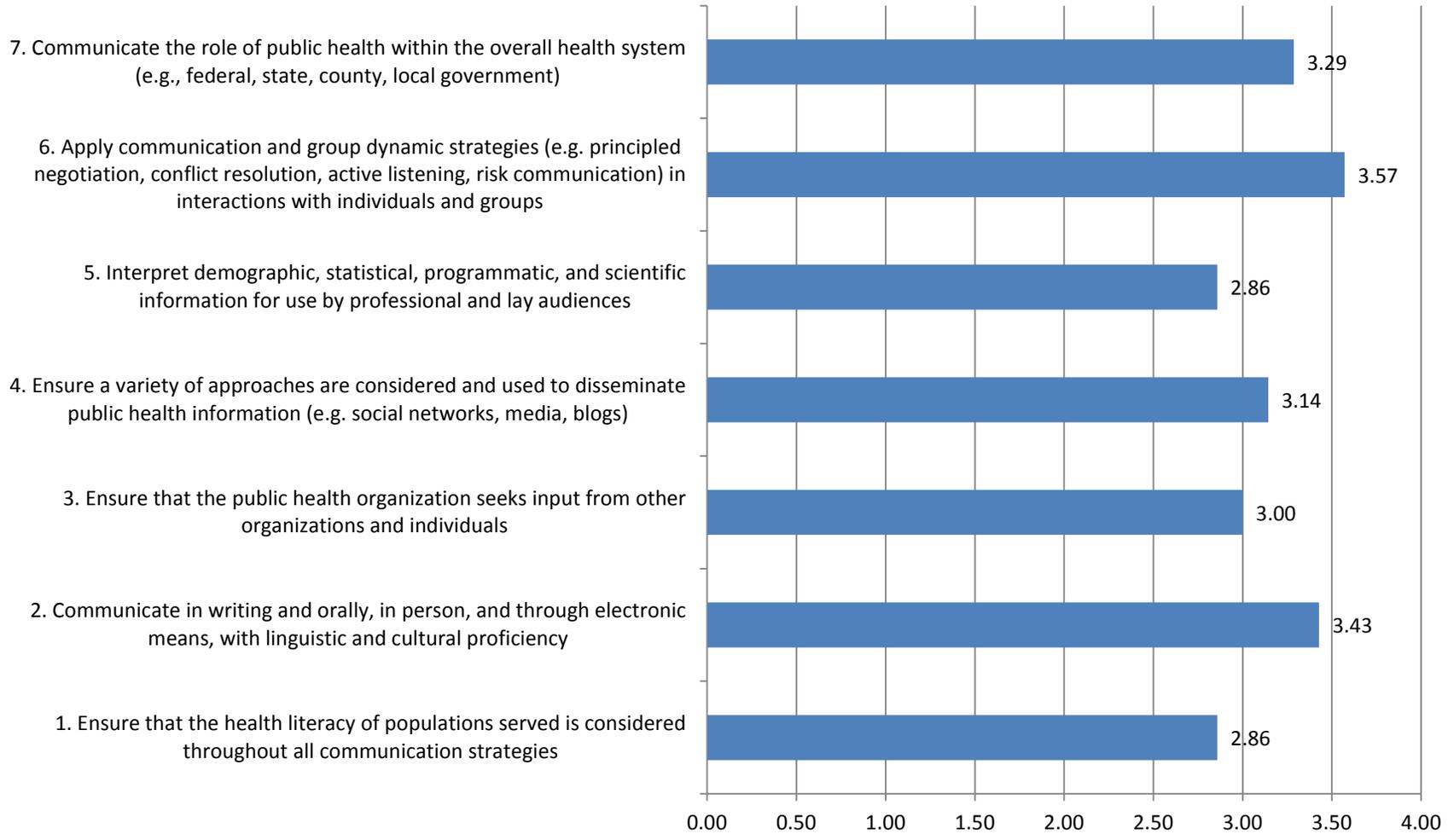
Bloomington Tier 3 Domain 1: Analytical Assessment Skills Response Average



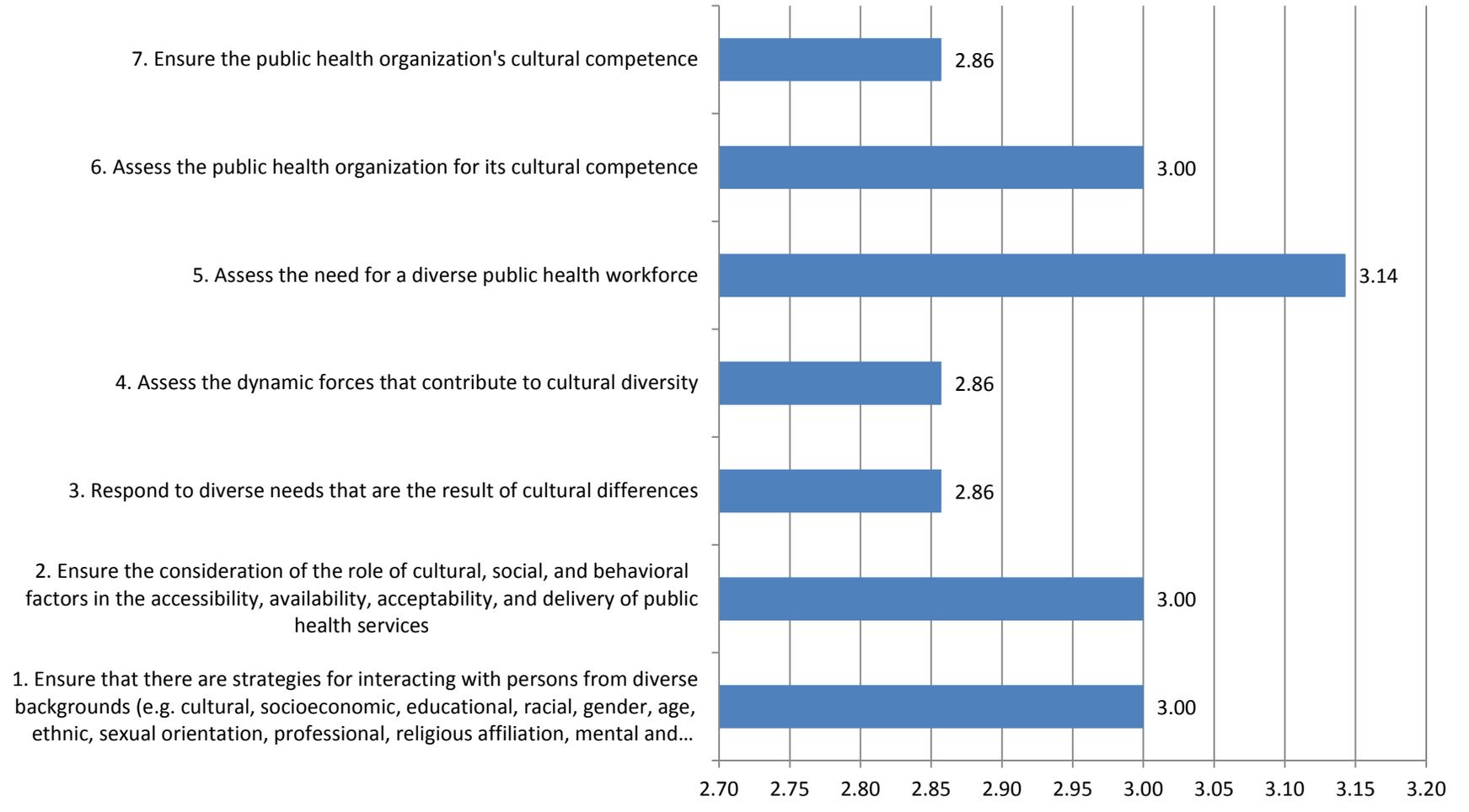
Bloomington Tier 3 Domain 2: Policy Development/Program Planning Skills Response Average



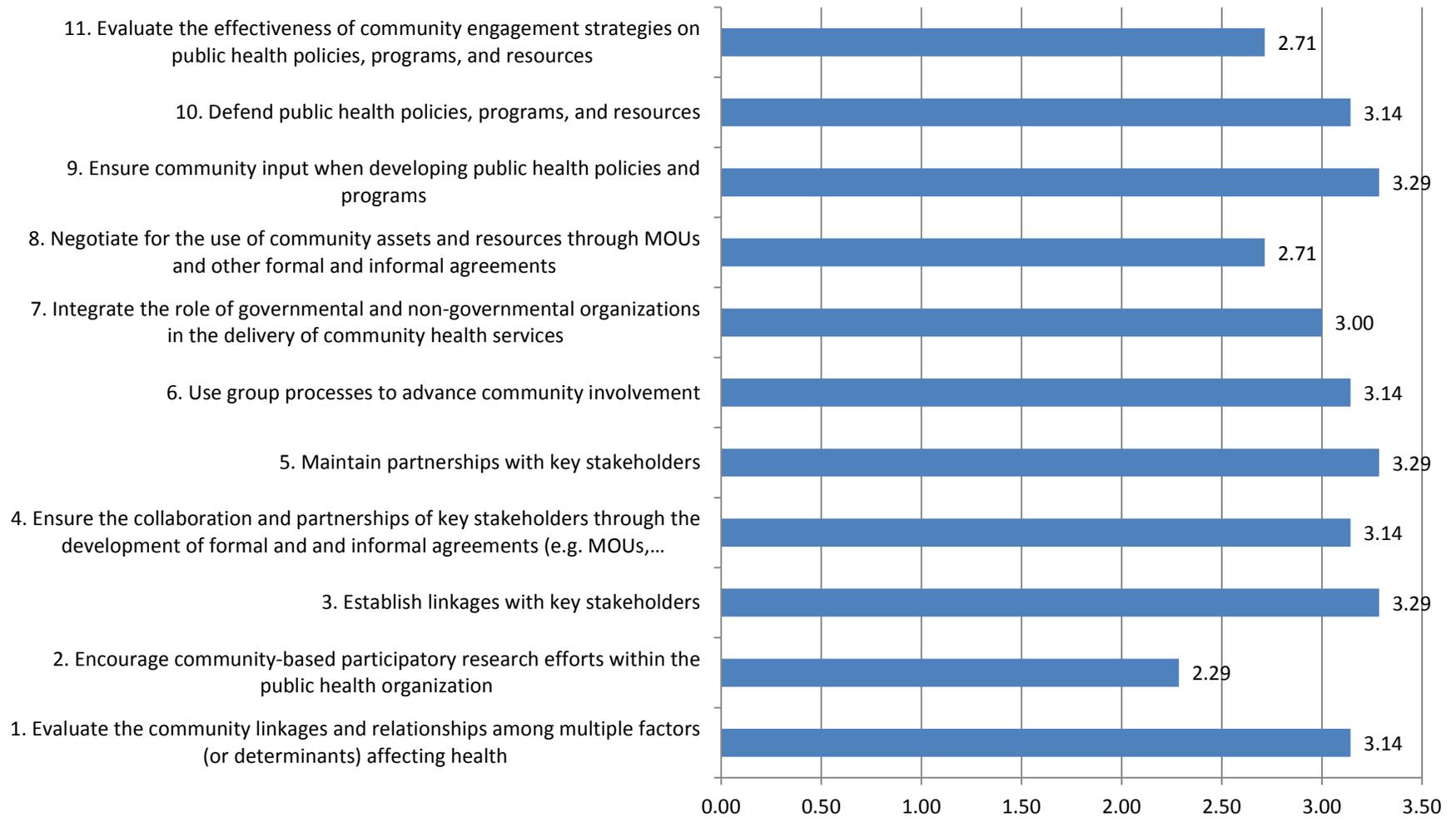
Bloomington Tier 3 Domain 3: Communication Skills Response Average



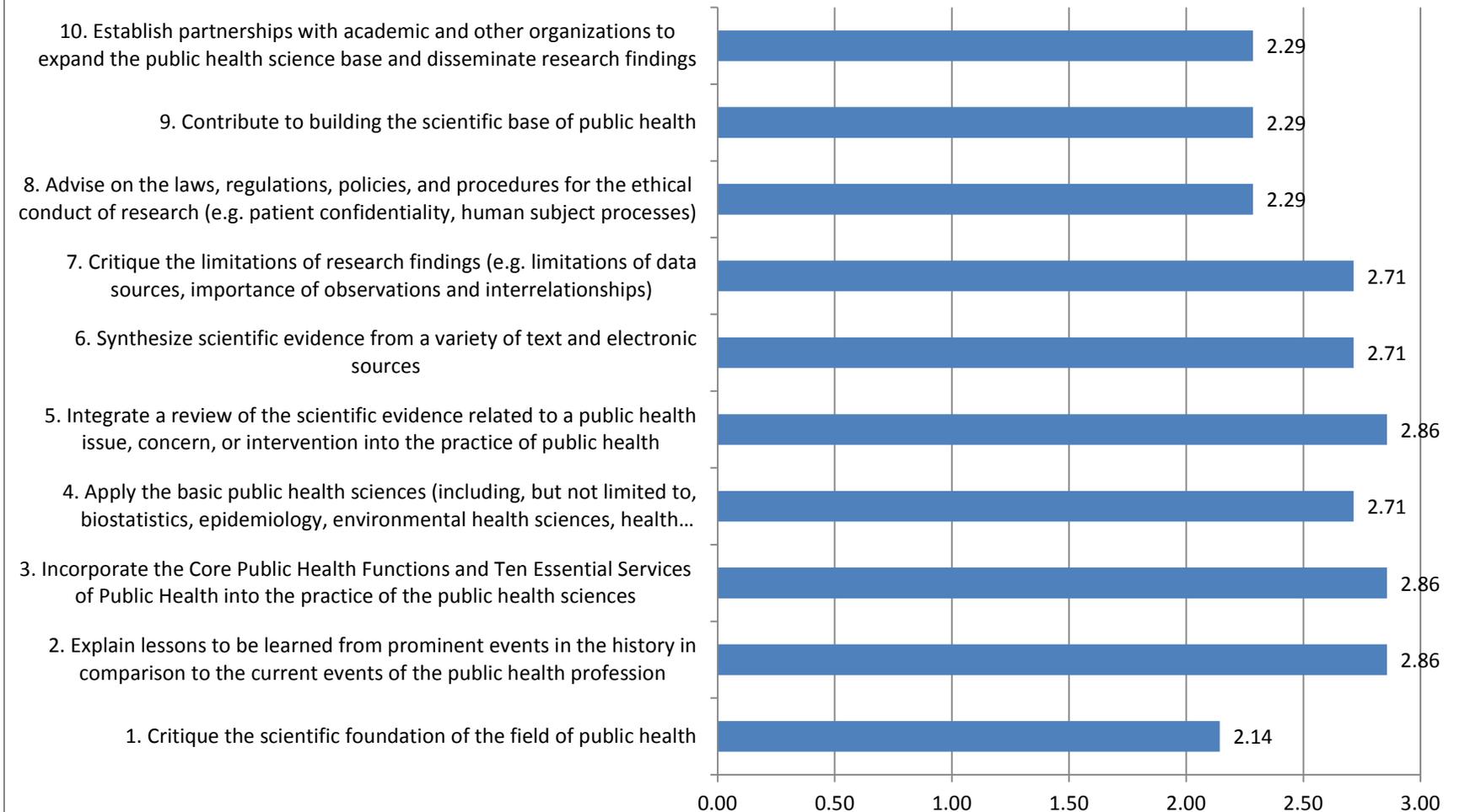
Bloomington Tier 3 Domain 4: Cultural Competency Skills Response Average



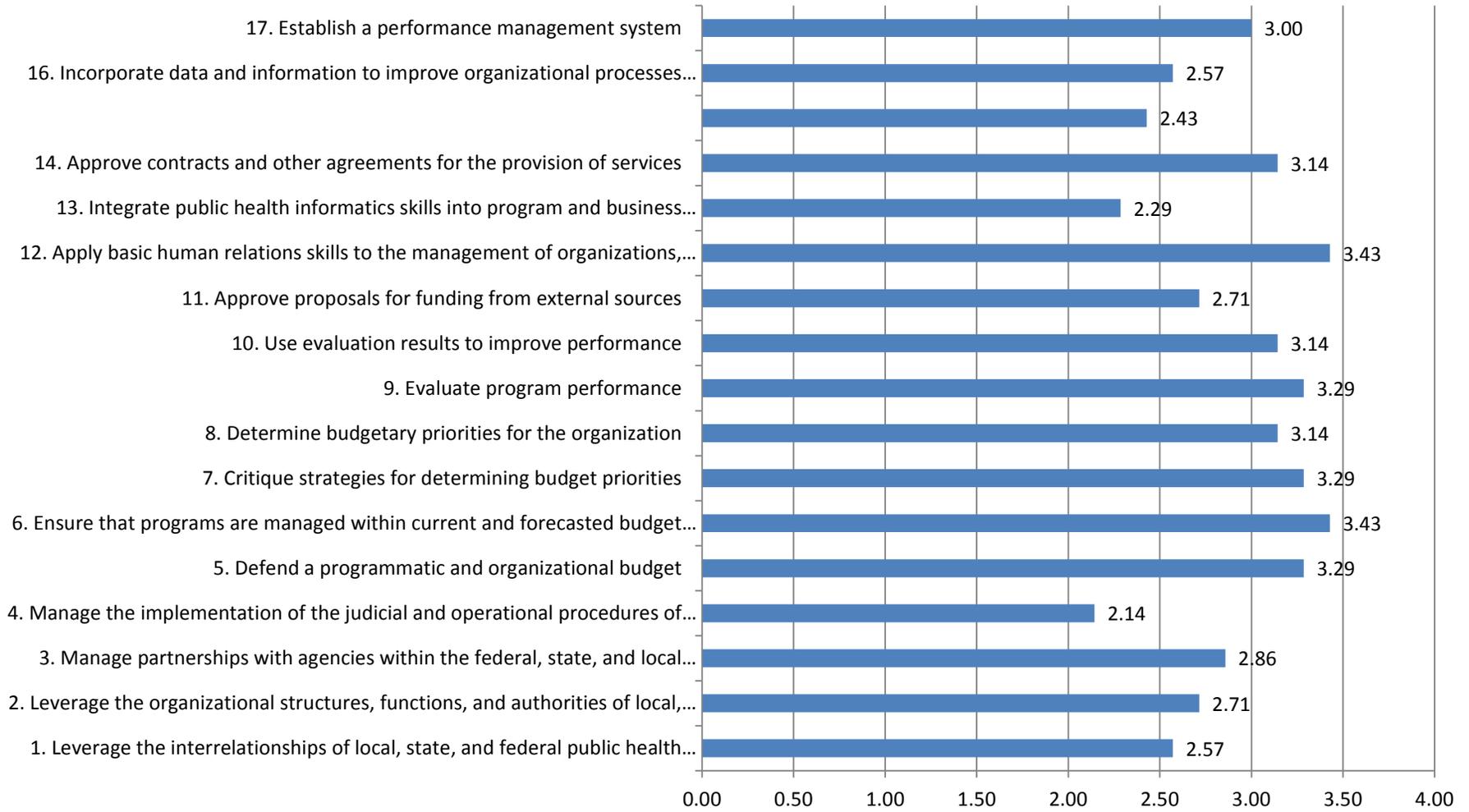
Bloomington Tier 3 Domain 5: Community Dimensions of Practice Skills Response Average



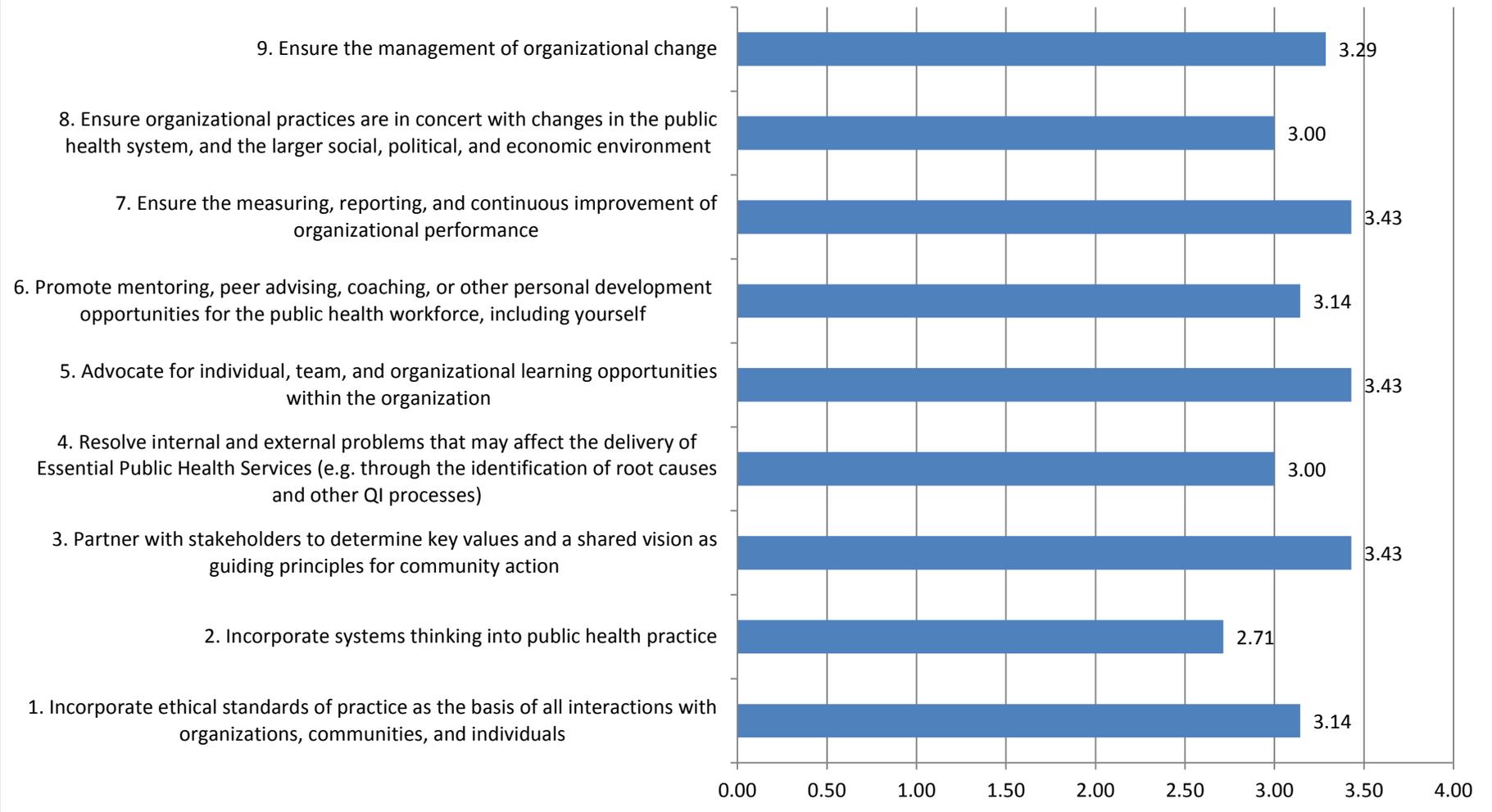
Bloomington Tier 3 Domain 6: Public Health Science Skills Response Average



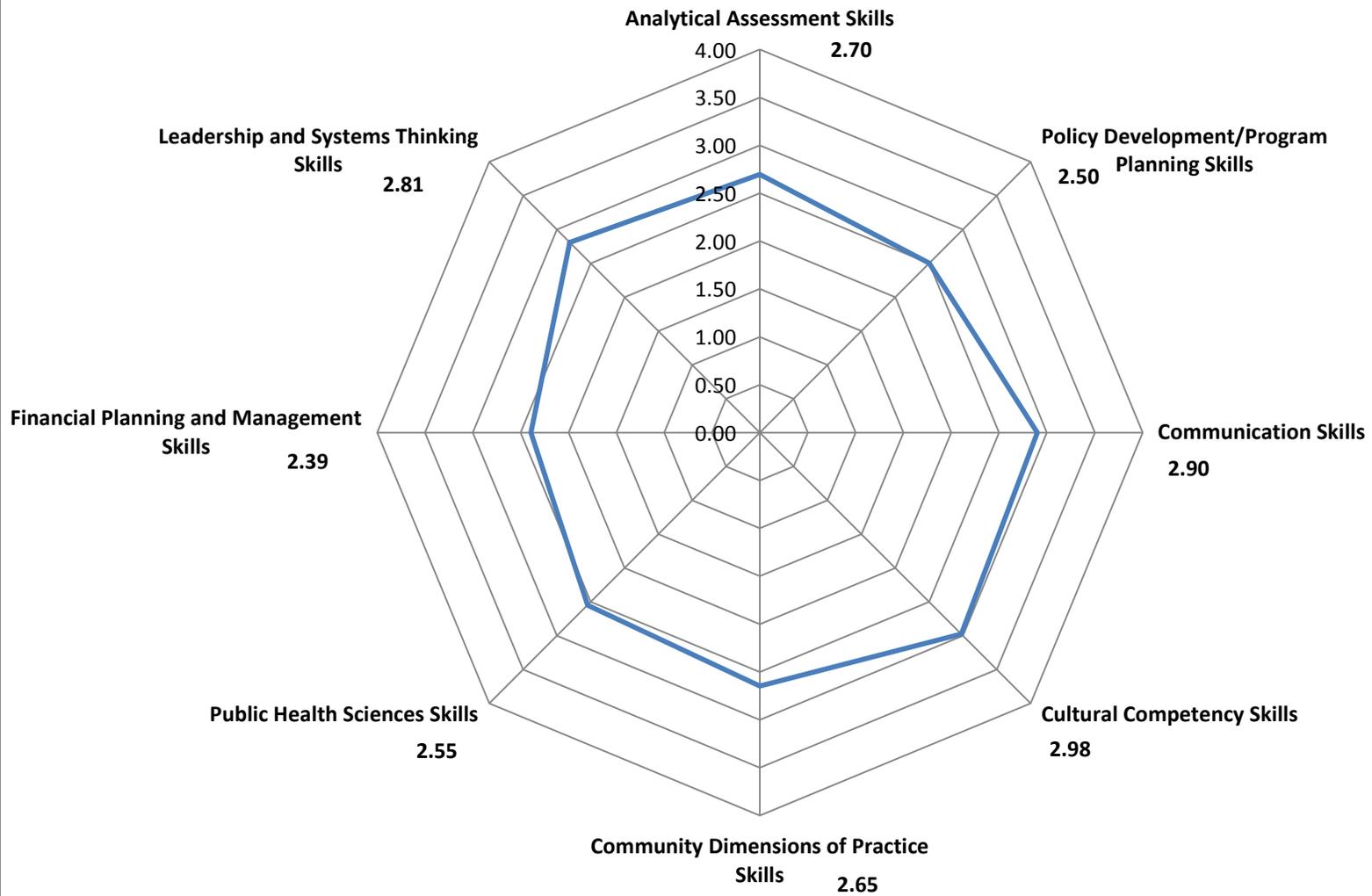
Bloomington Tier 3 Domain 7: Financial Planning and Management Skills Response Average



Bloomington Tier 3 Domain 8: Leadership and Systems Thinking Skills Response Average



Bloomington All Tiers Core Competency Assessment Domain Average



BLOOMINGTON - Core Competency Prioritization Matrix (02/07/2014)

	Analytical Assessment	Policy Development Program Planning	Communication	Cultural Competency	Community Practice Dimensions	PH Sciences	Financial Planning Management	Leadership Systems Thinking	SCORE	RANK
Analytical Assessment		1.0	0.2	0.2	1.0	5.0	1.0	0.2	8.6	7
Policy Development Program Planning	1.0		1.0	1.0	1.0	5.0	0.2	0.2	9.4	6
Communications	5.0	1.0		1.0	1.0	5.0	0.2	0.1	13.3	4
Cultural Competency	5.0	1.0	1.0		1.0	5.0	0.2	1.0	14.2	3
Community Practice Dimensions	1.0	1.0	1.0	1.0		5.0	0.2	1.0	10.2	5
PH Sciences	0.2	0.2	0.2	0.2	0.2		0.2	0.2	1.4	8
Financial Planning Management	1.0	5.0	5.0	5.0	5.0	5.0		5.0	31.0	1
Leadership Systems Thinking	5.0	5.0	10.0	1.0	1.0	5.0	0.2		27.2	2

Rating Scale:

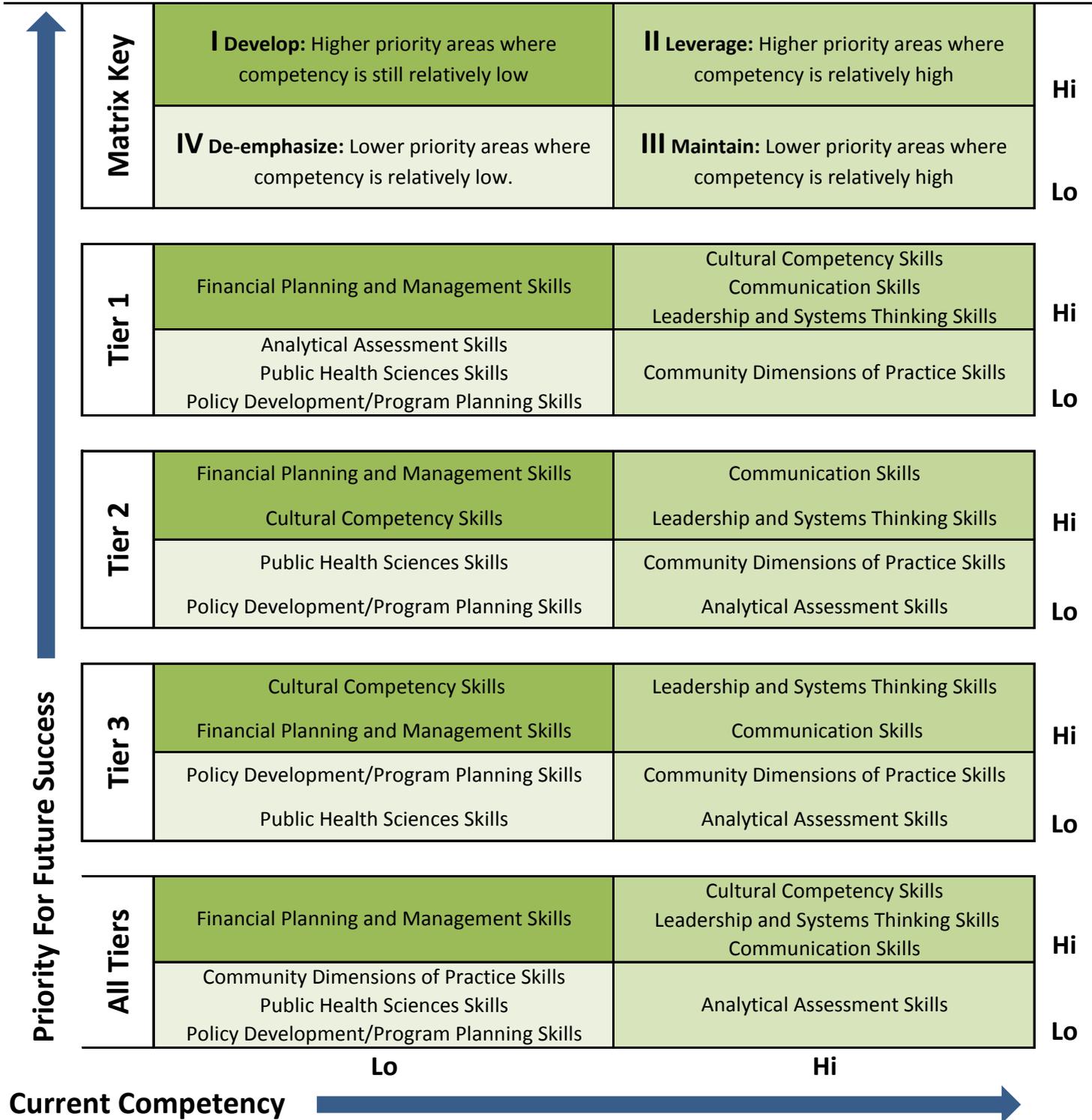
10: Exceedingly more important
5: Significantly more important
1: Equally important
0: No relationship
.2: Significantly less important
.1: Exceedingly less important

Brief Instructions

Compare the item on the first row to the item in the first column by asking the following questions:

1. Are the items related to each other? If no, place the number **0** in the cell; if yes, ask the following question:
2. Are they equally important in influencing each other? If yes, place the number **1** in the cell; if no, ask the following question:
3. Does having __ contribute more than __ in achieving our goals? The factor that contributes more than the other will get a **5 or 10** in the row
4. Each time a number is inserted into a row, the reciprocal value should be recorded in the corresponding cell for the same pair of factors. The reciprocal values are **10/0.1** and **5/0.2**.
5. The score column will auto-sum based on the ratings entered in the preceding columns.
6. The ranking column will need to be completed manually with the highest score receiving a 1 and the lowest score receiving an 8

Bloomington Public Health Core Competency High-Yield Analysis

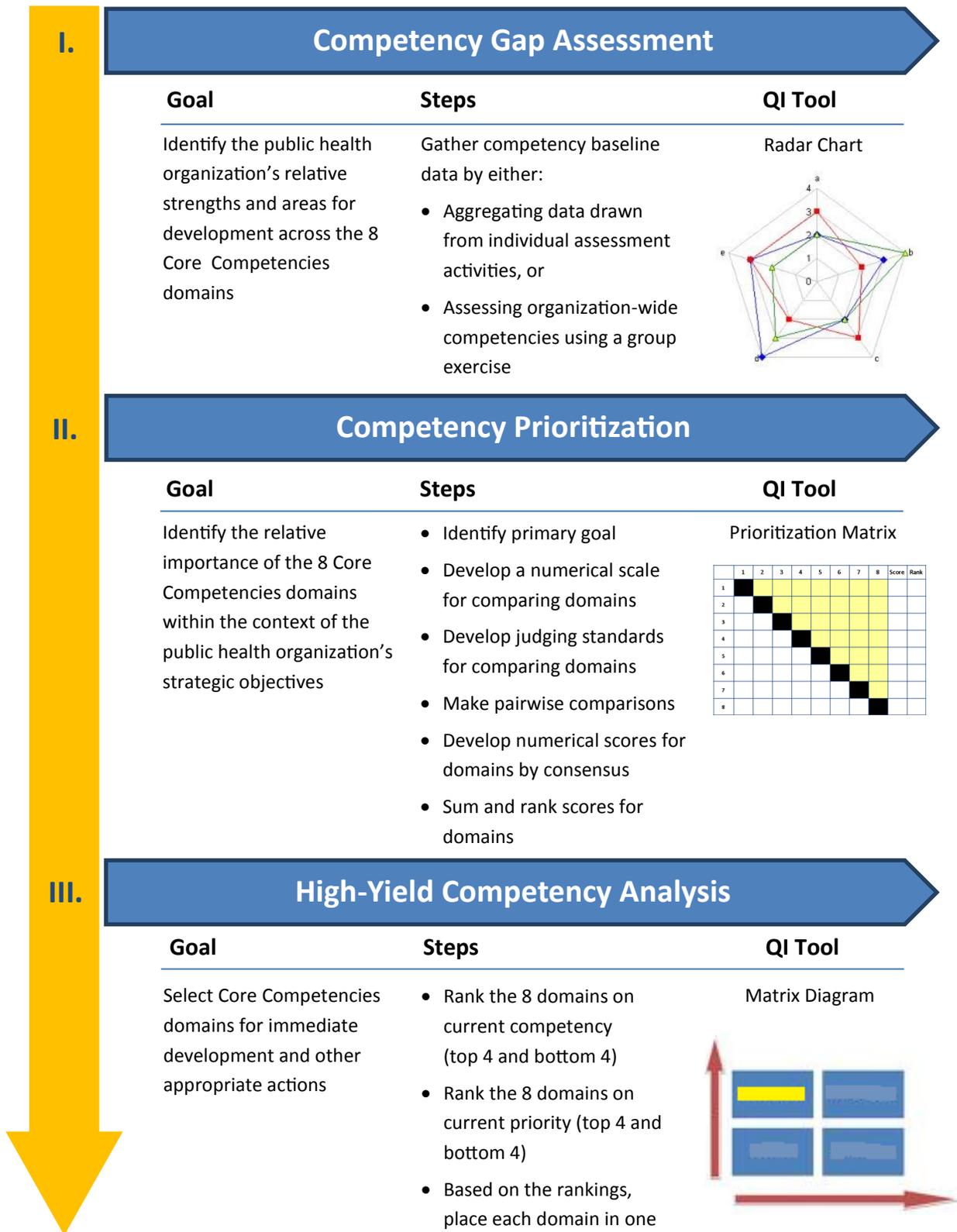


Based on competency assessment using Council on Linkages Core Competencies for Public Health Professionals

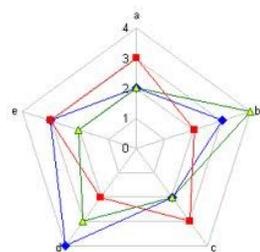
- Staff Response Rates:
- Tier 1: 79.40%
 - Tier 2: 87.50%
 - Tier 3: 100%

3-Step Competency Prioritization Sequence

The Core Competencies for Public Health Professionals (Core Competencies), a consensus set of competencies developed by the Council on Linkages Between Academia and Public Health Practice (Council on Linkages), are widely used by public health organizations.¹ Three quality improvement (QI) tools can be used in sequence to help public health organizations and professionals effectively prioritize competency development efforts.



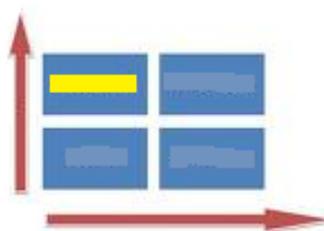
I. Competency Gap Assessment

Goal	Steps	QI Tool
Identify the public health organization's relative strengths and areas for development across the 8 Core Competencies domains	Gather competency baseline data by either: <ul style="list-style-type: none"> • Aggregating data drawn from individual assessment activities, or • Assessing organization-wide competencies using a group exercise 	Radar Chart 

II. Competency Prioritization

Goal	Steps	QI Tool																																																																																																			
Identify the relative importance of the 8 Core Competencies domains within the context of the public health organization's strategic objectives	<ul style="list-style-type: none"> • Identify primary goal • Develop a numerical scale for comparing domains • Develop judging standards for comparing domains • Make pairwise comparisons • Develop numerical scores for domains by consensus • Sum and rank scores for domains 	Prioritization Matrix <table border="1" data-bbox="1104 1029 1380 1239"> <thead> <tr> <th></th> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> <th>6</th> <th>7</th> <th>8</th> <th>Score</th> <th>Rank</th> </tr> </thead> <tbody> <tr><th>1</th><td>■</td><td>■</td><td>■</td><td>■</td><td>■</td><td>■</td><td>■</td><td>■</td><td></td><td></td></tr> <tr><th>2</th><td></td><td>■</td><td>■</td><td>■</td><td>■</td><td>■</td><td>■</td><td>■</td><td></td><td></td></tr> <tr><th>3</th><td></td><td></td><td>■</td><td>■</td><td>■</td><td>■</td><td>■</td><td>■</td><td></td><td></td></tr> <tr><th>4</th><td></td><td></td><td></td><td>■</td><td>■</td><td>■</td><td>■</td><td>■</td><td></td><td></td></tr> <tr><th>5</th><td></td><td></td><td></td><td></td><td>■</td><td>■</td><td>■</td><td>■</td><td></td><td></td></tr> <tr><th>6</th><td></td><td></td><td></td><td></td><td></td><td>■</td><td>■</td><td>■</td><td></td><td></td></tr> <tr><th>7</th><td></td><td></td><td></td><td></td><td></td><td></td><td>■</td><td>■</td><td></td><td></td></tr> <tr><th>8</th><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>■</td><td></td><td></td></tr> </tbody> </table>		1	2	3	4	5	6	7	8	Score	Rank	1	■	■	■	■	■	■	■	■			2		■	■	■	■	■	■	■			3			■	■	■	■	■	■			4				■	■	■	■	■			5					■	■	■	■			6						■	■	■			7							■	■			8								■		
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III. High-Yield Competency Analysis

Goal	Steps	QI Tool
Select Core Competencies domains for immediate development and other appropriate actions	<ul style="list-style-type: none"> • Rank the 8 domains on current competency (top 4 and bottom 4) • Rank the 8 domains on current priority (top 4 and bottom 4) • Based on the rankings, place each domain in one quadrant of the matrix 	Matrix Diagram 

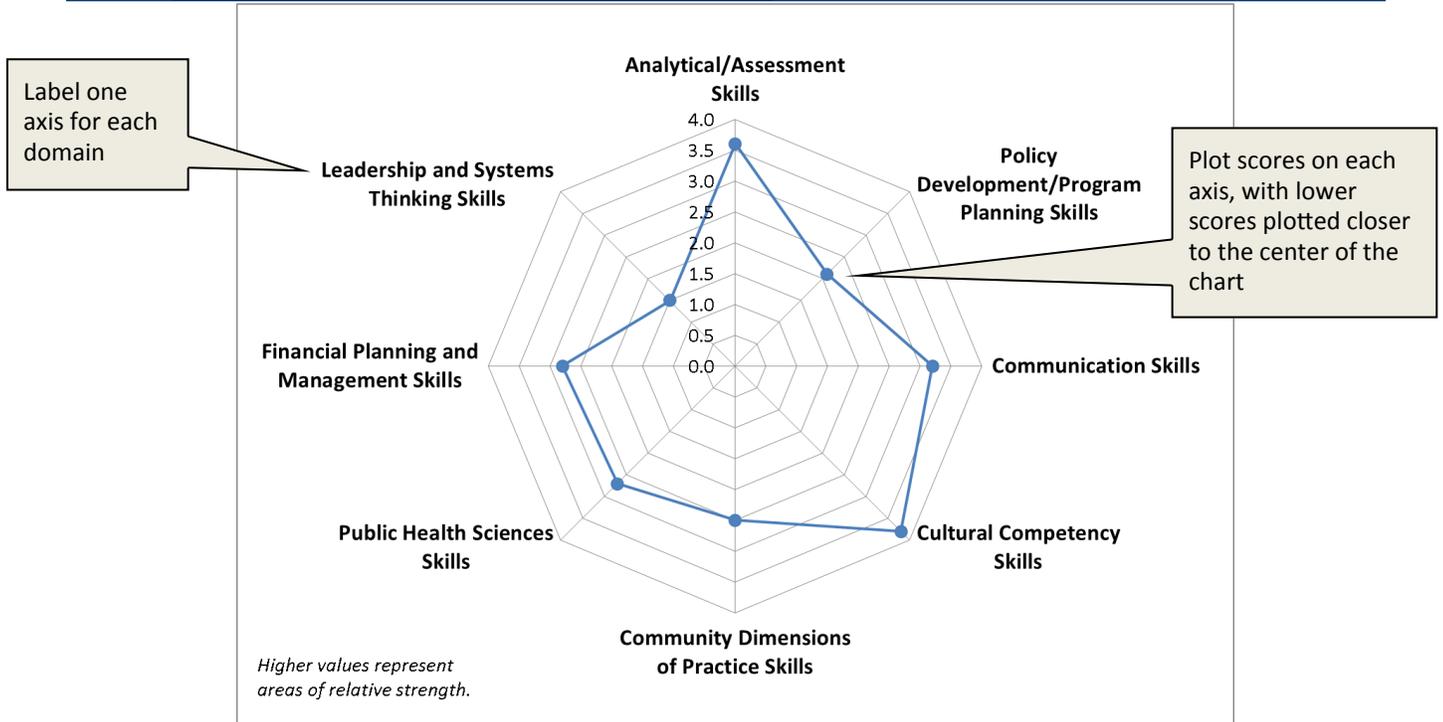
Develop and monitor high-yield domains

¹ The Core Competencies for Public Health Professionals and related tools are available at: <http://www.phf.org/programs/corecompetencies>

I. Competency Gap Assessment

Goal: Identify the public health organization’s relative strengths and areas for development across the 8 Core Competencies domains. A sample follows the description of steps, and a blank radar chart template is provided on the following page.

	Option 1 Aggregate Individual Competency Data	Option 2 Estimate Organization-wide Competencies
Steps	<ul style="list-style-type: none"> Gather individual-level data on current competencies in the workforce in all 8 Core Competencies domains. This may be done using a competency assessment tool (self-assessment).² Different versions of the tool are available for progressive career stages. Calculate an average score for each domain for each individual; then calculate an average score across all individuals in each domain. Plot average domain scores³ on a radar chart (example shown below). 	<ul style="list-style-type: none"> Convene a group of 8-10 individuals who are collectively familiar with the skills and performance of a broad cross-section of the workforce. Agree on a rating scale (e.g., 0 to 4) and reach consensus on the current competency of the workforce in each of the 8 Core Competencies domains. Capture the rationale for the consensus rating on each domain. Plot scores for each domain on a radar chart (example shown below).
Pros	Individual-level is ideal for capturing specifics and variations across the workforce. The data can be grouped by tenure, role, or other factors to assist in pinpointing areas of relative strength and opportunities for development.	Ideal for making a global assessment of overall workforce needs as a snapshot in time. Can be completed by a small group of individuals during a two-hour meeting.
Cons	Can be time-consuming to gather and analyze the data. No norms exist for the assessment tool.	Because group members have exposure to a limited sample of the workforce, the data may suffer from sampling bias.



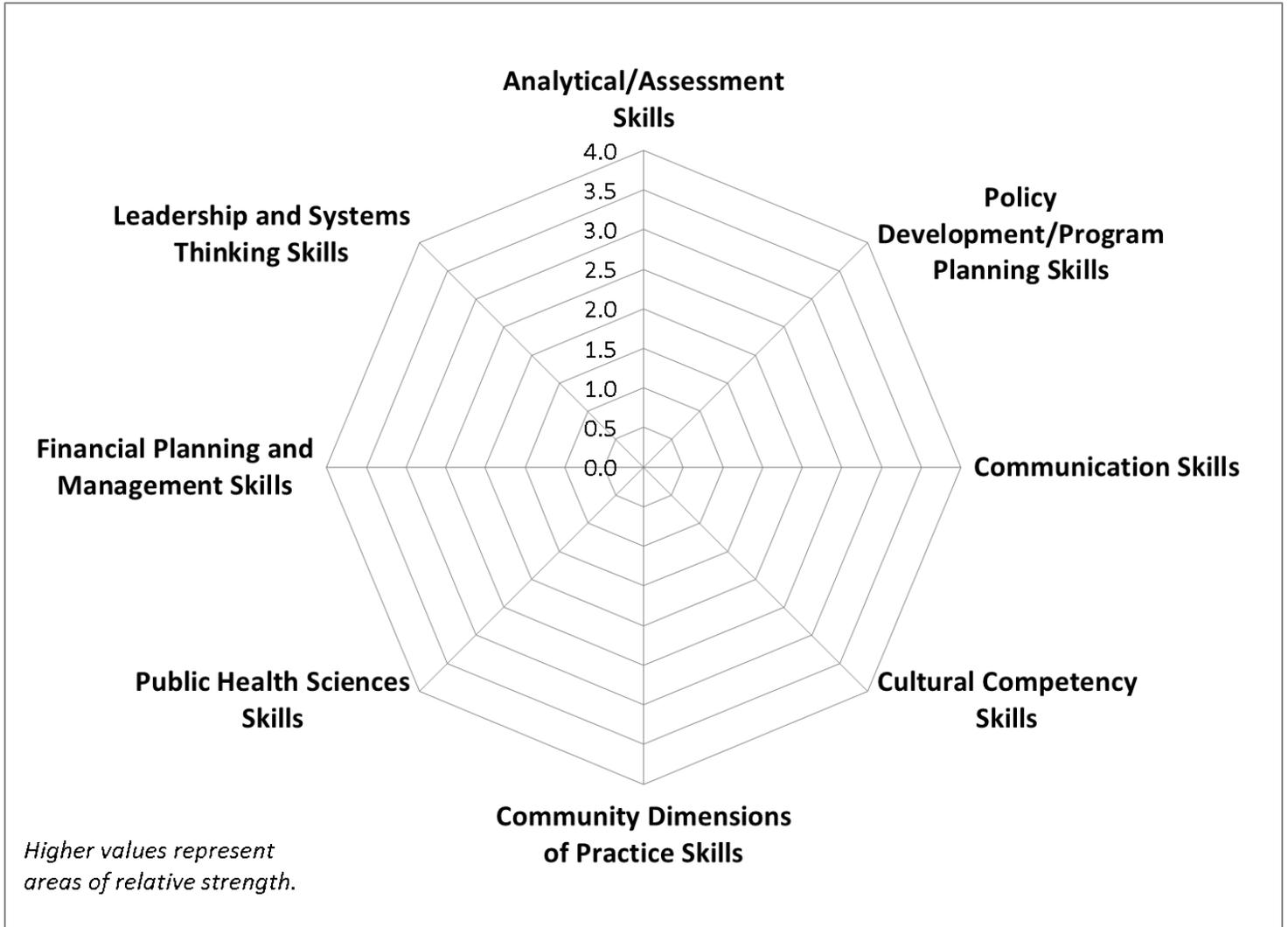
² The tools were designed as self-assessments to be completed by individual public health workers; they can also be used by managers to assess competencies of their team members. Competency assessment tools provided by the Council on Linkages are available at: <http://www.phf.org/competencyassessments>

³ Optional step: Calculate and plot the range and/or standard deviation for the workforce on each domain to examine the variation in competencies across the workforce.

I. Competency Gap Assessment (continued)

Use the blank radar chart to record the competency scores for your organization.

Which Core Competencies domains represent relative strengths and opportunities for potential improvement?



II. Competency Prioritization

Goal: Identify the relative importance of the 8 Core Competencies domains within the context of the public health organization’s strategic objectives. A sample follows the description of steps, and a blank prioritization matrix template is provided on the following page.

Steps: Construct and complete a matrix in which all domains are compared to all other domains (one at a time) with the relative importance of domains evaluated according to programmatic goals.

- Identify decision criteria driver or goal (e.g., improved outcomes, improved efficiency, improved client satisfaction, improved financial results, improved flexibility).
- Develop a numerical scale to represent each judgment based on the decision criteria selected. The scale will be used to assign values to each comparison of one domain to another. For example: 0—no relationship, 1—equally important, 5—significantly more important, 10—exceedingly more important, 1/5—significantly less important, 1/10—exceedingly less important.
- Develop standards for judging to make sure each domain gets a thorough evaluation.
- Develop numerical scores by consensus by making pairwise comparisons between all domains (e.g., domain 1 vs. domain 2, domain 2 vs. domain 3). Let the experts decide; expertise will tend to vary from one domain to another during the exercise.
 - * Does having ____ contribute more than ____ in achieving the goal?
 - * Will ____ lead toward the goal more than ____?
- Sum and rank scores for each domain.

Assign a score to each pairwise comparison; scores in white cells are the inverse of scores in the yellow cells for the same domain pair

In yellow cells, values less than 1 indicate the row’s domain is less important than the column’s domain

Total the cell values in each row to reach scores for each domain

Rank order the scores; lower ranks are the higher priorities according to the group’s consensus

	1	2	3	4	5	6	7	8	Score	Rank
1. Analytical/Assessment Skills		1/5	1	10	1/10	1	1/5	1/5	12.7	7
2. Policy Development/Program Planning Skills	5		1/5	1	10	10	5	5	36.2	1
3. Communication Skills	1	5		1	1	5	10	1	24.0	4
4. Cultural Competency Skills	1/10	1	1		5	1	1/5	5	13.3	5
5. Community Dimensions of Practice Skills	10	10	1	5		1	1/10	1	28.1	2
6. Public Health Sciences Skills	1	1	1/5	1/10	1		1	1/5	4.5	8
7. Financial Planning and Management Skills	5	5	1/10	1/5	10	1		5	26.3	3
8. Leadership and Systems Thinking Skills	5	1/5	1	1/5	1	5	1/5		12.8	6

II.

Competency Prioritization (continued)

Use the blank matrix below to complete the prioritization exercise.

Which Core Competencies domains are most important to realizing your organization’s strategic objectives?

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

This rating scale is only a sample. Scales with finer gradation can also be used (e.g., 1/3, 1/4, 1/5, 1/6); however, scales with fewer gradations (such as the one to the right) emphasize differences between options and make ranking domains much easier.

Rating Scale:

0—no relationship	1—equally important
5—significantly more important	10—exceedingly more important
1/5—significantly less important	1/10—exceedingly less important

III.

High-Yield Competency Analysis

Goal: Select Core Competencies domains for immediate development and other appropriate actions. A sample is provided below, and blank grid templates are provided on the following page.

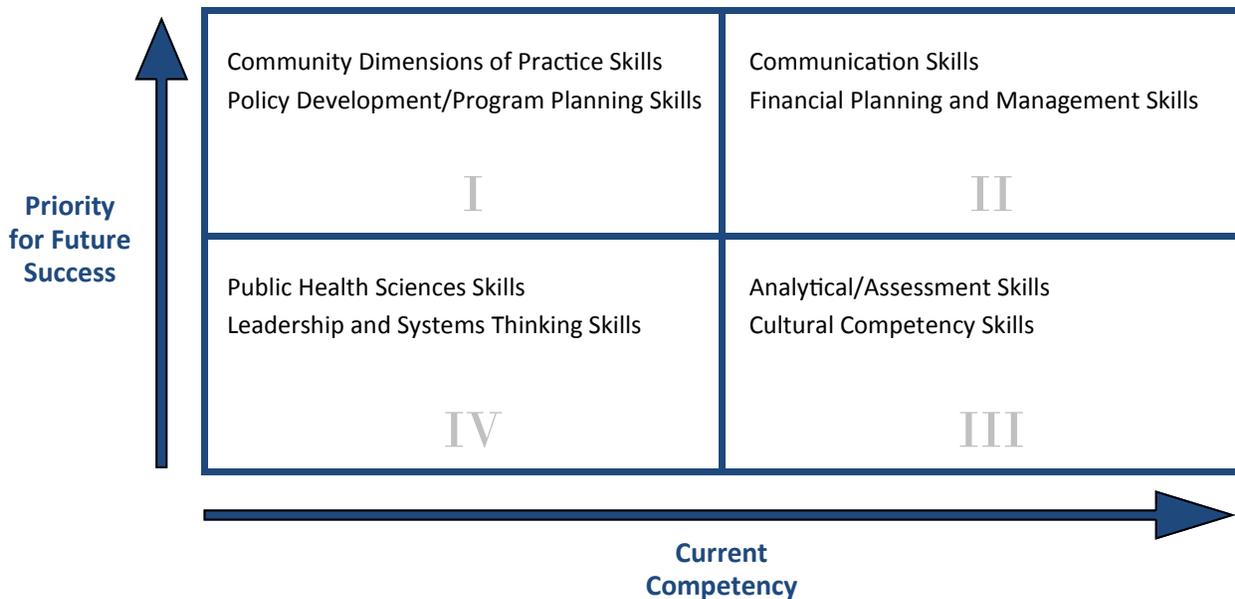
Steps: Using the data from Exercise I, rank the 8 domains on current competency.

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

Using the data from Exercise II, rank the 8 domains on current priority for future success.

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

Based on the rankings, place each domain in one quadrant of the Matrix Diagram below.



- I DEVELOP:** Higher priority areas where competency is relatively low
- II LEVERAGE:** Higher priority areas where competency is relatively high
- III MAINTAIN:** Lower priority areas where competency is relatively high
- IV DE-EMPHASIZE:** Lower priority areas where competency is relatively low

III.

High-Yield Competency Analysis (continued)

Use the blank tables below to identify high-yield Core Competencies domains.

Which Core Competencies domains shall we prioritize for workforce development in the short-term?

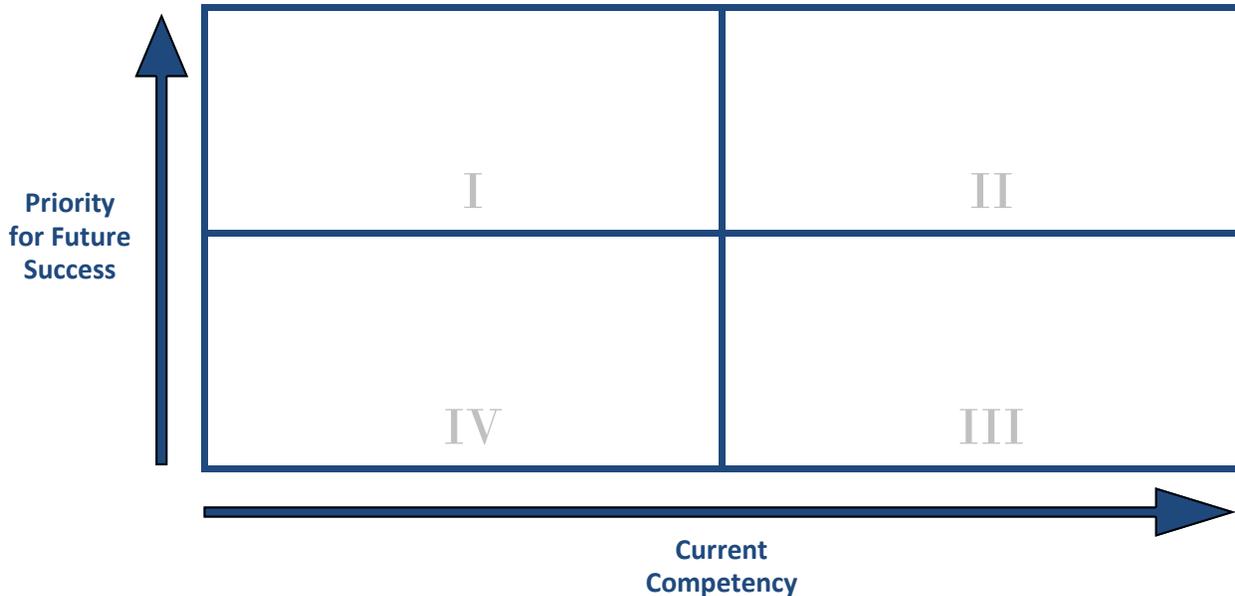
Steps: Using the data from Exercise I, rank the 8 domains on current competency.

Higher Competency Domains	Lower Competency Domains

Using the data from Exercise II, rank the 8 domains on current priority for future success.

Higher Priority Domains	Lower Priority Domains

Based on the rankings, place each domain in one quadrant of the Matrix Diagram below.



- I DEVELOP:** Higher priority areas where competency is relatively low
- II LEVERAGE:** Higher priority areas where competency is relatively high
- III MAINTAIN:** Lower priority areas where competency is relatively high
- IV DE-EMPHASIZE:** Lower priority areas where competency is relatively low