

Sufficient and Competent Workforce

Objectives:

1. **Competency.** By 2010, Wisconsin's public health system will assure a competent public health workforce through a collaborative information and education network for workforce preparation, support of current practice, and continuing education.
2. **Diversity.** By 2010, the composition of Wisconsin's public health system workforce at all levels will approach the demographic profile of the community.
3. **Enumeration.** By 2010, Wisconsin will have a monitoring system in place with the capacity to describe the current and future composition, distribution, and trends of Wisconsin's public health workforce.

Selected Accomplishments and DHFS Activities

- Established the public health Education and Training Advisory Committee (EdTRAC) to address public health system workforce issues in Wisconsin and to link education and practice. Its purpose is to provide system-wide leadership and guidance for workforce development, credentialing, continuing education, and professional development. Identified four critical EdTRAC priorities that include: curriculum and continuing education inventories and evaluations; training needs assessments of the workforce; assuring the development of competency-based curricula tied to the essential public health services; and prioritizing emergency preparedness continuing education initiatives.
- Collaborated in the formation and curriculum design of the Master's of Public Health program at the University of Wisconsin School of Medicine and Public Health through community and faculty advisory committees.
- Collaborated with the Medical College of Wisconsin and the University of Wisconsin School of Medicine and Public Health to establish the "Healthy Wisconsin Leadership Institute" to advance the capacity of the public health system workforce to improve and protect the health of communities.
- Supported the 2005 Annual Public Health Nursing Conference, "Renewing Public Health Nursing's Commitment to Social Justice."
- Conducted a competency-based emergency preparedness learning needs assessment of more than 10,000 people in Wisconsin's public health system workforce, including government, physicians, nurses, veterinarians, and allied health professionals.
- Invested in a distance learning management system (TRAIN) as a central repository of public health training resources in Wisconsin. TRAIN allows all public health partners to search and access relevant training and also serves as a tool to track and measure the impact of training on the public health system workforce.
- Collaborated with the University of Minnesota School of Public Health to develop and deliver competency mapping and evaluation courses to public health educators, training coordinators, and public health practitioners in Wisconsin.
- Recorded and distributed satellite programming on relevant public health topics from the CDC Public Health Training Network and other schools of public health to the public health system workforce. Key broadcasts in 2005 included: mass immunization, risk communication, protecting the food system from intentional threats, obesity, and nutrition.

- Invested in an online media presentation system (Mediasite) to decrease the costs of and barriers to public health communication, outreach, and education activities. This technology enables the Department to record and broadcast meetings, conferences, and training programs. The use of this technology allows easy access to “public health in action,” and broadcasts can easily be accessed on the Department’s Web site. In 2005 nearly 300 events were recorded and broadcast.
- Submitted a special report on epidemiology capacity in Wisconsin’s public health system. This report focuses on current and future epidemiological capacity needed to respond to threats to the health and safety of the public. Some of the report’s recommendations include: (1) Public health should work toward seamless integration of epidemiology concepts and practices throughout Wisconsin’s governmental public health system; (2) Effective and routine interaction between epidemiologists in governmental public health agencies and epidemiologists in health care facilities (hospitals) and institutions of higher education must be developed; (3) Local health departments need access to appropriately trained epidemiologists whose capabilities match the task or problem at hand; and (4) Epidemiologists need to be fully integrated into community health improvement planning and processes.

New and Emerging Issues

- According to the Council of State Governments and the National Association of State Personnel Executives, state health departments are the state agencies most likely to experience the government workforce shortage, with health fields most severely affected. Moreover, the U.S. Department of Health and Human Services Bureau of Health Professions reported a significant decline in the ratio of state public health workers to population, from 219 per 100,000 in 1980 to 158 per 100,000 in 2000. After 9/11, state public health agencies entered an era of new responsibilities, pressures, and challenges, ranging from first responders in terrorist attacks to emerging infectious diseases (Association of State and Territorial Health Officers, 2004).
- A shortage of public health professionals is expected in the fields of public health nursing, laboratory scientists, laboratory technicians, and environmental health practitioners (Association of State and Territorial Health Officers, 2004).
- The nursing workforce in Wisconsin has been characterized by fluctuations in availability, from shortages to excess. The current situation for hospitals is that entry level positions can be filled, with the number of new graduates meeting current needs. Problems persist in recruiting operating room, intensive care, emergency room, surgical, and managerial nurses. The registered nurse workforce is aging, with many members nearing retirement age. Baby boomers begin to turn 60 this year. Because nursing was one of the occupations open to women of that group, many registered nurses (up to 30 percent) are now nearing retirement age. The Department of Workforce Development finds that Wisconsin loses young workers to other states; yet Wisconsin does attract and retain a mature registered nurse population. The number of nurses taking the licensure exam is a measure of new entries into the workforce; this number has only recently returned to levels seen in the past. These numbers are not adequate to replace retiring workers and fill new positions created by our aging population (Source: Wisconsin Board of Nursing NCLEX records).

- Wisconsin's institutions of higher education are starting to ramp up efforts to produce environmental health specialists at the baccalaureate and master's levels. The current declining capacity would result in local communities having difficulty recruiting qualified professionals to protect the community from environmental threats, and to carry out regulation of food establishments, lodging, and recreational facilities.
- The new Healthiest Wisconsin Leadership Institute responds to a need for continuing education in public health and the development of leaders in Wisconsin's public health system. The Institute serves the learning needs of government, the public, private, nonprofit, and voluntary sectors.
- The U.W.-Madison's new Master's of Public Health program, which officially began in fall 2005, will provide a new opportunity for the public health workforce to pursue concentrated studies in public health and assures a pipeline for the entry of new workers into the public health system.