# WORKFORCE DEVELOPMENT PLAN

# **Canton City Public Health**

SUBJECT: Workforce Development Plan for years 2021-2023 Applicability: All Staff

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# A. APPROVAL

This document has been approved in accordance with the "800-001-P Standards for Writing and Approving Policies, Procedures, Standard Operating Guidelines, and Forms" procedure as of the effective date listed above.

# **B. REVISION & REVIEW HISTORY**

| <b>Revision Date</b> | <b>Review Date</b> | Person  | Notes on what changed |
|----------------------|--------------------|---------|-----------------------|
| 3/16/2021            |                    | M. Hall | Updated full plan     |
|                      |                    |         |                       |
|                      |                    |         |                       |
|                      |                    |         |                       |



| C. TABLE OF CONTENTS   |          |
|--|----------|
| A. APPROVAL  | 1        |
| B. REVISION AND REVIEW HISTORY   | 1        |
| C. TABLE OF CONTENTS:  | 2        |
| D. PURPOSE   | 3        |
| E. AGENCY PROFILE  | 3        |
| 1. Mission, Vision and Values  | 3        |
| 2. Strategic Priorities  | 3        |
| 3. Governance  | 3        |
| 4. Learning Culture<br>5. Workforce Policies                           | 4        |
| 6. Links to Other Agency Plans   | 5        |
| F. WORKFORCE PROFILE   | 5        |
| 1. Introduction  | 5        |
| 2. Current Demographics  | 5        |
| 3. Future Workforce  | 7        |
| G. COMPETENCIES AND EDUCATIONAL REQUIREMENTS                           | 8        |
| 1. Core Competencies for CCPH  | 8        |
| 2. Other Competencies  | 9        |
| 3. CE Required by Discipline   | 9        |
| H. TRAINING NEEDS  |          |
| 1. Introduction  | 10       |
| 2. Competency Based Training Needs                                     | 10       |
| 3. Health Equity Training Needs  | 11       |
| 4. Other Needs   | 12       |
| 5. Barriers and Solutions  | 13       |
| I. WORKFORCE DEVELOPMENT GOALS   | 14       |
| J. CURRICULUM AND TRAINING MATRIX                                      | 15       |
| K. IMPLEMENTATION AND MONITORING                                       | 15       |
| 1. Introduction  | 15       |
| 2. Communication   | 15       |
| 3. Training Evaluation   | 16       |
| <ol> <li>4. Tracking</li> <li>5. Roles and Responsibilities</li> </ol> | 16<br>16 |
|  | -        |
| L. CITATIONS AND REFERENCES  |          |
| M. CONTRIBUTORS  | 16       |
| N. APPENDICES AND FORMS  |          |



# D. PURPOSE

Training and development of the workforce is one part of a comprehensive strategy toward agency improvement. Fundamental to this work is identifying gaps in knowledge, skills, and abilities through the assessment of both organizational and individual needs and addressing those gaps through targeted training and development opportunities.

This plan serves as the foundation of Canton City Public Health's ongoing commitment to the training and development of its workforce.

#### E. AGENCY PROFILE

1. MISSION, VISION AND VALUES

From the 2021-2023 Strategic Plan dated 11/23/2020 (and subject to revision) Canton City Public Health's mission, vision, and values are:

- a. Canton City Public Health's mission is "Working together to prevent the spread of disease, promote health, and protect the public from harm." Our Vision is "Healthy neighborhoods, healthy neighbors, healthy families." Our Core Values are:
  - Quality Efficiency and effectiveness in our programs.
  - Service Ask, listen, and respond to the needs of the community.
  - Equity Focusing resources where they are needed most.
  - Trust Inclusive, accountable and transparent in all we do.

#### 2. STRATEGIC PRIORITIES

From the 2021-2023 Strategic Plan dated 11/23/2020 (and subject to revision) Canton City Public Health's priorities are:

- a. Healthy Neighborhoods
  - Increase the cleanliness of neighborhoods
  - Increase access to healthy food choices
  - Increase access to safe, affordable, and quality housing
- b. Healthy Neighbors
  - Increase utilization of department services by community members who do not speak English as their primary language.
  - Increase the number of people who report regular participation in physical activity
  - Decrease the rate of STI spread in Canton City
- c. Healthy Families
  - Decrease the rate of infant mortality and disparities in birth outcomes.
  - Increase the rate of childhood vaccinations
  - Develop a health education program at CCPH



- 3. GOVERNANCE
  - a. Canton City Public Health is governed by a Board of Health comprised of 5 members, appointed by the Mayor and confirmed by City Council. Per Ohio Administrative Code 3701.342 all Board of Health members must complete 2 hours of continuing education annually. The areas of training include, but are not limited to: ethics; public health principles; and member's responsibilities. Members as of this writing with expiration year of their terms include:
    - Mayor Thomas Bernabei
    - Stephen Hickman, DVM (2022)
    - Dr. James Johns MD FAAFP (2023)
    - Dr. Amy Lakritz MD, FAAP (2020)
    - Cleo Lucas (2023)
    - Patrick Wyatt (2021)

# 4. LEARNING CULTURE

- a. Canton City Public Health staff attend a wide variety of continuing educational trainings throughout each year, generally pertinent to their position. Staff have been involved in helping to plan various professional conferences both as trainer and organizer in the past. Staff is generally self-motivated to learn and grow in their position and derive satisfaction in improving their competencies within public health fields. The Department is supportive of staff desiring to pursue higher education within their field of expertise, as a result, there are multiple staff members who hold advanced degrees in public health and nursing, or who are working on obtaining advanced degrees in public administration. For employees wishing to pursue advanced degrees, the Board allows for flex time, tuition reimbursement, and/or educational leave. Training is funded through separate line items in the budget and division leaders are responsible to review their training budgets yearly so that any anticipated expenses can be included in the yearly budget proposal. Employees needing to obtain continuing education are encouraged to seek out and take advantage of opportunities at conferences, online and at nearby agencies.
- b. Canton City Public Health holds a yearly staff meeting for all staff. The day is set aside for professional development and team building activities, training on needed topics (e.g. health equity, cultural competency, etc.), updates on projects within the department and staff recognition. The 2020 meeting was held using Zoom due to the COVID-19 pandemic and focused on team building instead of the typical day filled with speakers and activities. Like other businesses, the department was able to pivot quickly and learn to use technology to meet this yearly training goal. Each division is also encouraged to hold a staff training yearly.

# 5. WORKFORCE POLICIES

a. The current health code allows for Occupational Improvement Leave and Continuing Education Incentive in section 207.13.



- b. The following policies assist and support employees and promote a more positive work culture:
  - 800-002-P Employee Career Development Policy
  - 800-009-P Employee Training Policy
  - 800-025-P Employee Recognition Policy
  - 800-029-P Lactation Accommodation Policy
  - 800-032-P Alternative Work Schedule Policy
- c. The previous Workforce Development Plan had several goals that have been met. In addition, other projects not included in the previous plan have been started in order to improve the workforce overall.
  - An "Onboarding" Policy has been drafted.
  - A standing Workforce Development Team has been created and chartered.
  - An objective training evaluation form has been created for trainings done at Canton City Public Health.
  - A newsletter committee has been formed and chartered. This committee has successfully written and disseminated four editions of "The Insider". The newsletter has been well received by staff and has been a great tool for getting out information and bolstering morale during a very busy time for public health.
  - A salary restructuring committee is looking at salaries department-wide in an effort to address one of the common complaints in employee satisfaction surveys.
  - 800-058-P Exit Interview has been developed and implemented. Data gathered from exit interviews will be helpful in addressing some of the staff satisfaction and turnover concerns.

#### 6. LINKS TO OTHER AGENCY PLANS

a. This WFD Plan was written with input from other plans already approved within the Department. The 2021-2023 Strategic Plan and information pertaining to the Quality Improvement Plan (QI Plan) can be located on the Canton City Public Health's website (www.cantonhealth.org). Census data and other statistics were obtained from the City of Canton's website at www.cantonohio.gov.

#### F. WORKFORCE PROFILE

- 1. Introduction
  - a. This section provides information on the current workforce demographics and anticipated needs for Canton City Public Health.
- 2. Current Demographics



- a. The table below summarizes the demographics of our current workforce as of November 2020. Staff were sent a link to a survey and asked to self-report.
- b. Due to the pandemic, staff are being paid out of different funds than normal. As a result, the % paid by Grants/Contracts in the following chart is from 2019 figure is not a true representation of funding for employees.

| Category                                      |                                     | # or % |
|---|-------------------------------------|--------|
| Total # of Employees                          |                                     | 67     |
|   | Full Time                           | 57     |
|   | Part Time                           | 10     |
| # of FTE                                      |                                     | 63.13  |
| % Paid by Grants/Contracts                    |                                     | 74     |
| Gender:                                       | Male                                | 12     |
|   | Female                              | 48     |
|   | Preferred not to Answer             | 0      |
|   | Did not respond                     | 7      |
| Race:   | Hispanic                            | 1      |
|   | American Indian/Alaska Native       | 1      |
|   | Asian or Pacific Islander           | 3      |
|   | African American                    | 9      |
|   | Caucasian                           | 49     |
|   | Preferred not to answer             | 4      |
|   | Did not respond                     | 7      |
| Age:  | < 20                                | 0      |
|   | 20-29                               | 10     |
|   | 30-39                               | 13     |
|   | 40-49                               | 18     |
|   | 50-59                               | 13     |
|   | >60                                 | 6      |
|   | Did not respond                     | 7      |
| Primary Professional Discipline/ Credentials: | Leadership/Administration           | 3      |
|   | Nurse                               | 7      |
|   | Registered Sanitarian/EH Specialist | 6      |
|   | Epidemiology                        | 2      |
|   | Clerk/Clinic Support                | 9      |
|   | Dietitian                           | 4      |
|   | Laboratory Services                 | 4      |
|   | Engineers                           | 6      |
|   | Breastfeeding Support               | 1      |
|   | Technicians                         | 5      |
|   | Project Manager/Coordinator         | 9      |
|   | Other                               | 4      |
|   | Did not respond                     | 7      |
| Years of Service (retention):                 | 0-10                                | 44     |
|   | 11-20                               | 17     |



| 21-30   | 2  |
|---|----|
| 31-40   | 2  |
| >4(   | 2  |
| Employees that plan to leave in next 3 years: Managemen | 1  |
| Non-Managemen   | 10 |
| Do not plan on leaving                                  | 49 |

# 3. Future Workforce

- a. Local demographics show the population in Canton has been on the decline for decades. Since 2000, the population trended downward another 10% (2010 census). While overall poverty rates have decreased slightly from the early 2000's and rests currently at 31%, the poverty rate for children increased from 45% to 48%. If this trend continues in the 2020 census, there will likely be a greater need for nursing and WIC services, which provide limited health care such as vaccines, as well as nutritional counseling and food for pregnant or nursing mothers and children living in poverty. Further, Canton has been negatively impacted by the ongoing opioid epidemic, in areas such as health, housing and poverty. While the department has reached out to people struggling with this addiction through the SWAP program and has built strong ties with the mental health community, mental health and addiction services are not primary services provided by the department. Additionally, home ownership in the city has trended downward. With rentals making up more than half of the city housing and the number of vacant houses rising, there is a potential for the number of nuisance housing complaints to increase, creating a need for additional staffing to address these complaints. Open dumping is also again on the rise, despite the provision of both city sanitary services and free recycling options for used tires. Open dumping cases are time consuming, although recent partnerships with the Stark County Sheriff should help reduce the time Environmental Health staff is needed to do investigations into the perpetrators of this crime.
- b. 2020 brought with it a pandemic which resulted in an increased need for staff to take on additional duties to best address the needs of the community during a very trying time. Despite the addition of staff on a temporary basis to assist the department, staff in Nursing, Laboratory and the Office of Public Health Information and Innovation (OPHII) continue to be stretched thin and are becoming exhausted by the needs created by the pandemic in addition to the needs of the jobs these staff normally hold. Although the pandemic will eventually end, the toll it wreaks on both staff and budget may need to be addressed in the future, both in planning and in actuality. Further, the pandemic has had an adverse effect on the local economy. Unemployment has risen and restaurant and retail businesses, which are more likely to employ those living in poverty, are struggling to remain open. This will impact the Department for years to come as the local economy struggles to recover from effects that are not totally realized at this time.
- c. Census data shows that the **Hispanic and Latinx population is increasing, having already doubled since the 2000 census.** Given the increase in Latinx-owned businesses in the community, the 2020 census is likely to show another increase. This is significant because



many of these individuals do not speak fluent English and most of the staff does not speak fluent Spanish. This part of our community often has a need for our services, whether in the clinics for vaccines, as a WIC client, or in the community as they open businesses we license or to help address housing complaints. Canton City Public Health needs to have more bi-lingual services and literature available in order to best assist these populations in understanding unfamiliar codes and rules, to understand the health care services available, and to improve overall services provided to this population.

- d. Census data shows that Canton's population is 21% African American (2010). However, 13% of the Department's workforce is African American. When factoring in other races, 20% of the workforce is non-Caucasian. These percentages show an increase from the last WFD plan and hint at the success of the recruitment policy and advertisement of open positions at the various community centers. Continued work on recruiting individuals that reflect the diversity within the Canton community is recommended to ensure that the workforce is as diverse as the community and increase the comfort level of clients of differing backgrounds.
- e. There are 11 employees planning to leave within the next three years, only one of whom is in management. With a relatively young workforce, it is **important to have succession plans in place**, as well as a strong mentorship and **training program**. The Department should consider exploring the reasons why people are planning to leave and find ways to address.
- f. There is a need to foster interest in public health as a career option in the local population to ensure that there are local candidates for future openings. Canton City Public Health needs to build working relationships with the local school districts, including charter, parochial and vocational schools to bring public health as a career goal to students. Canton City Public Health has enjoyed being part of training students at the college level in the past by hosting student nurses and employing college students for summer positions. However, developing interest in secondary school, vocational and STEM students would be beneficial.
- g. Census data shows that educational attainment in the community is a further impediment to attracting a diverse workforce. According to census data, of those in the city aged 25 and above, 85% have a high school education while only 13% have a bachelor's degree. Most of the jobs within Canton City Public Health require at least a 4-year degree, which means that there are fewer employment candidates for many positions available within the immediate, Canton community. When looking at the entire county, only 22% hold at least a 4-year degree. CCPH, along with the other local health departments, may consider focusing attention jointly on the local high schools and vocational schools, as well as the local colleges to generate interest in the pursuit of a public health career. Developing partnerships with the local STEM programs may result in increased awareness of and interest in the public health professions.



#### G. COMPETENCIES AND EDUCATIONAL REQUIREMENTS

- 1. Core Competencies for CCPH
  - Canton City Public Health uses the Council of Linkages Core Competencies for Public Health Professionals as outlined in Policy 800-019-P Position Descriptions and Competencies. Additionally, CCPH has adopted other professional competencies, as follows:
    - Epidemiologist Competencies
    - Public Health Nursing Competencies
    - Environmental Health Competencies
    - Laboratory Competencies
    - Air Pollution Control Competencies
    - Dietitian Competencies
- 2. Other Competencies
  - a. Canton City Public Health has also adopted the following Organizations Competencies with the expectation that all employees will exemplify:
    - Customer Focus
    - Accountability
    - Equity, Ethics and Fairness
    - Continuous Quality Improvement
    - Occupational Health and Safety
    - Emergency Preparedness
  - b. A more complete and detailed review of Competencies can be found in Appendix A of <u>800-019-P Position Descriptions and Competencies</u>.
- 3. CE Required by Discipline
  - a. Continuing education is required for various licensed, certified or registered staff by their professional organizations or Boards. Staff at the department may also hold licenses or certifications that are not required for their position. Education requirements for professional licenses/certifications required by staff position descriptions are supported by CCPH and are listed in this chart.

| Discipline                   | CE Requirements as of December 2020 |  |
|------------------------------|-------------------------------------|--|
| Nursing                      | 24 contact hours every 2 years      |  |
| Nurse Practitioner           | 100 CEU every 5 years. In area of   |  |
|                              | specialty, 24 hours every 2 years   |  |
| Registered Sanitarian        | 18 CEU yearly                       |  |
| Health Educator (CHES/MCHES) | 75 CECH every 5 years               |  |



| Certified Public Health Practitioner       | 50 hours every 2 years                   |  |
|--|--|--|
| Physician                                  | 100 hours every 2 years                  |  |
| Social Worker (LSW, LISW, MSW, etc.)       | 30 hours every 2 years, 3 in ethics      |  |
| Dietitian (RD/LD)                          | 75 CPEU every 5 years by the             |  |
|  | Commission of Dietetic Registration      |  |
|  | (CDR)                                    |  |
| Board of Health member                     | 2 contact hours yearly                   |  |
| International Board of Certified Lactation | 75 CERP every 5 years or by retest       |  |
| Consultant (IBCLC)                         |  |  |
| Asbestos Inspector (AHES and AHAS)         | 8 hour refresher yearly                  |  |
| Lead Risk Assessor                         | Refresher course every 3 years           |  |
| Certified Pest Control Operator            | 1 hour of Core required + ½ hour in each |  |
|  | category on application required +       |  |
|  | additional time in any category (after   |  |
|  | completing 1 hour of core and each       |  |
|  | category requirement)= 5 hours of time   |  |
|  | for recertification per every 3 years    |  |
| Method 9 Field Certification for APC Staff | Once every 6 months                      |  |

# H. TRAINING NEEDS

- 1. Introduction
  - a. This section provides and overview of Canton City Public Health's identified training needs as well as a description of the barriers to the achievement of closing those gaps.
- 2. Competency-Based Training Needs
  - a. In July 2018, in partnership with the Ohio State University College of Public Health (OSU) and with support from the Ohio Department of Health, staff were surveyed on basic public health competencies. The Workforce Development team selected 15 competencies that would apply to all staff, regardless of title, position or role. These were assessed against two measures: the employee's perception of the competency's importance to their job and the employee's self-reported skill level for that competency. The survey and report from OSU are located in Appendix B. CCPH anticipates repeating this assessment by July 2024.
  - b. Of the competencies surveyed, the three found to have the largest gaps between perceived importance and skill level were: 1) Maintaining performance and self-control under pressure; 2) adapting to changing business needs, conditions and work: and 3) motivating colleagues for purposes of achieving program and organizational goals. To a lesser extent, gaps exist also in: delivering culturally appropriate service; using computers/technology; and knowing your role in an emergency. Overall, employees feel

that understanding one's role in public health, understanding strategic priorities and participating in professional development not only have importance to their position but that they do these things well.

- i Most employees describe maintaining performance under pressure to be important, but many do not feel competent in this area. This area is important for customer service and quality of service, and to encourage trainings on dealing with adversity and working under pressure. At the 2018 All Staff Meeting, Steve Schaffer of Canton City Police Department presented on Verbal De-escalation techniques for dealing with adversity.
- ii Change, and adapting to change, is necessary for individuals, as well as organizations. Change is a part of growth, without it, individuals and organizations can lose their ability to best serve the changing needs of a community and cease to thrive. CCPH has demonstrated a willingness to adapt to changing needs through newer programs like THRIVE and SWAP, and have been changing to respond to increasing needs of the community during the current pandemic. Change, regardless of benefit, is still a process that can be painful for those needing more time to adapt. At the 2019 All Staff Meeting, Mark Plaster presented on Change Management. Although his information was well received, this topic will never lose its importance, and CCPH is encouraged to continue to find opportunities to offer wellness training and speakers to discuss ways to adapt to the ever-changing face of public health.
- iii Employees responding to this survey felt that motivating colleagues is an important part of their job; however, they did not feel as competent in this area. Motivating colleagues encompasses respect for other points of view, participation in teams, and the encouragement of the expression of new ideas. As part of the 2020 All Staff Meeting, a Clifton Strengths Assessment was offered to all employees. Discussions that day centered on learning more about the strengths of the team members we work with daily. This activity has been a great way to begin to help employees understand one another and perhaps even to foster a greater respect for those things that make each of us unique and needed members of the public health team. More activities that focus on team building and motivating one another would be beneficial in the future.
- c. The remaining smaller gaps identified demonstrated a clear need for a more structured on the job training for new employees. The completion of the Onboarding policy should help to address these needs. The creation of and hiring for a Human Resources oriented position, the Vital Statistic Administrative Supervisor, in 2020 should also help with things like ensuring training opportunities are publicized to those who need them. Indeed, the current pandemic will surely offer us some future training goals in this area, ones that we will want to not neglect year to year as we seek to keep our workforce well-trained that they may be not only competent in their response to a crisis, but also confident in their abilities to do so.



- 3. Health Equity Training Needs
  - a. In August 2017, a Culturally and Linguistically Appropriate Services (CLAS) Self-Assessment was completed. The results revealed gaps in training and skills that formed the basis for a goal in the first Workforce Development Plan to provide translation and interpretation services available to all divisions included updating forms and guidance documents to the top 3 languages spoken in Canton. This goal has not been fully realized at this time and has been modified for inclusion in this plan. However, it was decided by the Division Leadership Team (DLT) that translation of written materials will take place outside of Workforce Development as it is incorporated into the Strategic Plan, and it is not reflected in the goals found here.
  - b. Canton City Public Health has been collaborating with Stark Mental Health and Recovery (StarkMHAR) which has offered a number of free training on cultural competence. CCPH has also had speakers come in to the All Staff Meeting to discuss cultural competence. Most recently, the Latino Business League has collaborated with some staff to translate some documents for business owners. Translation service by phone has been made available to field and office staff that need to communicate with those who have limited English proficiency. Continued collaboration with these partners will enable staff at CCPH to better serve communities that are underserved.
  - c. With this year has come increased focus on the impact racism has on health outcomes in minority communities. Per Board of Health Resolution 2020-06, the Canton City Public Health has resolved in June 2020 that racism is a public health crisis and has outlined steps toward identifying and eliminating wherever possible the deleterious effect racism has on the health of our community members. Steps that will be undertaken include forming a Public Health and Race Equity Committee within the department, continued collaboration with minority stakeholders and community partners, and to develop some workforce development goals focusing on training in health equity, systemic racism, and cultural competence as well as looking at recruitment policies.
- 4. Other Needs
  - a. The 800-015-P Quality Improvement (QI) plan specifies the QI knowledge and skills requirements of all staff. It also specifies the initial and ongoing QI training requirements and use of a QI skills assessment.
  - b. A Strengths, Weaknesses, Opportunities and Threats (SWOT) Analysis was done as part of developing the 2021-2023 Strategic Plan. The following were documented areas to look at for improvement and as a place to look when setting goals for this plan:

# Weaknesses

- Staff are retiring and we are losing institutional knowledge
- Budget uncertainty, especially due to the COVID-19 pandemic



- The department is monolingual, with no staff trained to interpret
- Cultural competency in the department is perceived as low
- The department has a low presence in local school career programs
- No term-limits for the Board of Health
- Lack of interest from qualified candidates for many positions
- Lack of promotion opportunities for staff
- Department pay is perceived as low compared to other departments of health
- The building is old, in disrepair and too small for our needs
- There is a lack of awareness of training opportunities available to staff

#### Threats

- Distrust of government and programs
- Increased political polarization
- Efforts to undermine public health services
- People leaving public health as a career
- Racial disparities in the community
- Lack of affordable housing and home ownership
- Increasing number of food deserts
- Decreasing city population
- Fear and distrust of current policing policies
- COVID-19 An additional threat
  - Taking resources away from other programs
  - Increased isolation and threat to mental health
  - Threat of mass staff illness
  - The COVID-19 pandemic caused by the SARS-CoV-2 virus continues to dominate the conversation in public health. While the pandemic has increased the public's awareness of public health and its importance, prevention and control of the disease continues to be a drain on department resources and a burden on the community.
- 5. Barriers and Solutions
  - a. Barriers to training identified in the OSU survey assessment include: time away from work and agency/grant budget restrictions. Other barriers identified by staff include a lack of subjects relevant to job and the paperwork related to travel being cumbersome. Staffing levels prevent being out of the office for training and the location of trainings being distant were also mentioned.
  - b. It will be important to assure adequate staffing is available as well as to adequately fund training budgets for each division. Free trainings are available at other health departments and community partners and will be considered first to minimize costs while maximizing workforce development opportunities. Employees often pass up opportunities due to a perceived lack of funds available. Supervisors and staff will need



to do a better job of communicating so that costs and time needed for training are anticipated and planned for in yearly budgets.

- c. A standing Workforce Development Team has been established and a new position for a Human Resource Liaison, the Vital Statistics Administrative Supervisor, has been created and filled. The HR position responsibilities will include completing the onboarding policy as well as working with training related goals.
- d. The pandemic has been difficult both in terms of a lack of training options available and the time constraints for some divisions to be able to take advantage of online or virtual training options. It is likely that budgetary and time constraints will be a concern even as the pandemic ends.

# I. WORKFORCE DEVELOPMENT GOALS

| GOAL                         | OBJECTIVES   | BENCHMARKS   | RESPONSIBLE<br>PARTIES   | DATE DUE   |
|------------------------------|--|--|--|------------|
| To ensure<br>a well- trained | Completion of onboarding policy  | Policy will be developed and implemented   | Admin/HR   | 6/30/2021  |
| workforce                    | Complete a probationary staff<br>evaluation policy with standardized<br>forms for evaluating probationary<br>staff   | Policy will be developed and implemented with 100% of probationary staff evaluated   | DLT/HC/WFD   | 12/30/2021 |
|                              | All staff will complete Employee<br>Career Development Worksheet<br>(800-002-01-F) with their<br>supervisor  | 100% of non-probationary staff will complete with their supervisor   | Staff/Supervisors  | 12/30/2021 |
|                              | Provide 2 hours yearly of training<br>opportunities to address staff needs<br>like dealing with adversity, working<br>under pressure and adapting to a   | At least 1 hour will be held in 2021 with 2 hours held in 2022   | Training<br>Committee/ All<br>Staff committee                  | 12/30/2022 |
|                              | changing landscape in public health  | Create a means to list and link to relevant<br>training opportunities for staff to<br>complete on their own  | WFD/HC/HR  | 12/30/2021 |
|                              | Provide training on racism's effect<br>on health outcomes and equity   | 100% of staff will obtain training and periodic training will be offered for future new employees  | WFD/Public<br>Health and Racial<br>Equity Committee<br>(PHREC) | 12/30/2022 |
|                              | Provide training opportunities in<br>cultural competence and social<br>determinants of health (this may be<br>satisfied by the "racism's effect on<br>health outcomes and equity"<br>training) | 100% of staff will obtain one hour of<br>cultural competence training yearly (this<br>may be satisfied by the "racism's effect on<br>health outcomes and equity" training) | WFD/Public<br>Health and Racial<br>Equity Committee<br>(PHREC) | 12/30/2021 |



|  | Develop a means of tracking   | Develop method and incorporated into  | WFD/Training                          | 12/30/2022 |
|--|---|---|---------------------------------------|------------|
|  | training taken both on-line and in<br>person using a standard method  | 800-009-P Employee Training<br>policy describing how employees will<br>track their training   | committee/HR                          | 12/30/2022 |
|  |   | Create/identify a format that is suitable<br>for tracking in-house required trainings<br>for each employee  | WFD/Training<br>committee/HR          | 12/30/2022 |
| To address<br>communication needs  | Provide training on interpretive services available to all divisions.   | Onboarding training will include training<br>of new employees on how to access<br>these services  | WFD/HR                                | 9/30/2021  |
| between staff and<br>client (Health equity)                                  |   | 100% of staff will be trained to use available services   | WFD/HR                                | 12/30/2021 |
| To ensure future<br>workforce and<br>leadership needs                        | Establish a program bringing Public<br>Health career information to<br>students in the local schools.   | Establish a committee or work group to<br>create goals, identify prospective<br>community partners and determine an<br>action plan for outreach   | DLT/HC/WFD<br>team                    | 2/28/2022  |
|  |   | Investigate current relationships between<br>local schools, STEM programs, and<br>vocational schools and CCPH to identify<br>contacts and current collaborative efforts<br>that can be expanded | Work Group or<br>Committee<br>created | 6/30/2022  |
|  |   | Identify any CCPH staff interested in being<br>part of a speaker's bureau for school<br>outreach  | Work group or<br>committee<br>created | 12/30/2022 |
|  | Establish yearly meetings to address succession planning, and identify potential leaders.   | Create a list of people interested in<br>leadership roles based on the career<br>development plans  | DLT/HC                                | 12/30/2022 |
|  |   | Evaluate the succession planning program yearly during a meeting with DLT and HC  | DLT/HC                                | 12/30/2023 |
| To promote<br>connections within<br>the department with<br>new employees and | Establish a process to help new<br>employees with questions that are<br>not job specific by pairing them<br>with an experienced employee            | Survey employees hired within the past<br>two years about the helpfulness of the<br>onboarding process and training process   | WFD/Personnel<br>Committee            | 6/30/2022  |
| increase retention. volunteer<br>not relate<br>introduce<br>to ensure        | volunteer to help with questions<br>not related to specific training, to<br>introduce them to other staff, and<br>to ensure that any questions that | Identify gaps in onboarding and training<br>for purposes of making this process more<br>seamless and increase job satisfaction  | WFD/Personnel<br>Committee/HR         | 8/31/2022  |
|  | come up get answered.   | Explore mentorship programs at other health departments for possible future execution   | WFD/Personnel<br>Committee/HR         | 12/30/2022 |
| Promote<br>communication and<br>transparency within<br>the department        | Continue to publish a relevant and informative newsletter quarterly.  | Survey employees to determine the<br>information employees most wish to see<br>in the communication in order to keep<br>improving   | WFD/Newsletter<br>Team                | 12/30/2021 |
| Recognition of staff-<br>QuEST Awards  | Review and revise the employee recognition awards criteria.   | Create a means to select award winners<br>based on a standardized and objective<br>data   | WFD                                   | 12/30/2022 |



|  | Revise the nomination form or create a | WFD | 12/30/2022 |
|--|--|-----|------------|
|  | committee section form based on        |     |            |
|  | standardized criteria                  |     |            |
|  |  |     |            |

#### J. CURRICULUM AND TRAINING MATRIX

The Required Training Matrix (800-009-01-A) for Canton City Public Health is an attachment of 800-009-01-P Employee Training Policy.

# K. IMPLEMENTATION AND MONITORING

- 1. Introduction
  - a. This section provides information regarding communication, evaluation, tracking and monitoring of the WFD Plan.
- 2. Communication
  - a. Employees of Canton City Public Health will have access to this plan via the Canton City Public Health website. This plan shall be reviewed with new employees within 90 days of hire and all staff shall revisit the plan as it is updated. Employees will be made aware via email when updates are made.
- 3. Training Evaluation
  - a. Any training that is hosted by Canton City Public Health will have a standard evaluation form given to participants after the training.
  - b. For training not hosted by Canton City Public Health, the evaluation method provided by the training provider, if any, shall be utilized.
- 4. Tracking
  - a. Policy 800-009-P Employee Training, explains how trainings are tracked for CCPH employees. The training log should be made available to the employee's supervisor upon request. It is a goal to update the training tracking process. The Workforce Development Team will be responsible to receive updates of completed trainings to periodically track of required trainings are being completed.
- 5. Implementation
  - a. The Workforce Development Team and its subcommittees will be responsible to track status of workforce development goals, complete assigned workforce development goals, develop or find needed trainings, conduct needed trainings, plan and conduct all-staff meetings, and review and revise the WFD Plan. The WDT has a team charter that



defines the membership. All sub-committees under the WDT also have their own charters.

- b. The WFD Plan will be implemented by the Health Commissioner through the DLT and the WDT. The plan will be reviewed at least twice each calendar year by the DLT as part of the strategic plan monitoring of Canton City Public Health and by the WDT. Reasonable effort will be made by the DLT and the WDT to implement the plan's goals and recommendations.
- c. Once WFD Plan is approved, WDT will develop a work plan that will be attached as an appendix to this document. Work plan will be updated quarterly with most recent version uploaded to the CCPH website.
- 6. Review and Maintenance
  - a. This Plan and the Training Matrix will be reviewed by the WDT upon expiration about once every three years to allow for updates. At that time, goals will be evaluated for completion and new goals will be set to maintain progress.

#### L. CITATIONS AND REFERENCES

800-900-01-A Required Training Matrix

800-009-P Employee Training

#### M. CONTRIBUTORS

The following staff contributed to the authorship of this document:

- 1. Jessica Boley, THRIVE Epidemiologist
- 2. Maria Hall, Sanitarian II
- 3. Laura Roach, WIC Director
- 4. Ron Jones, APC Engineer
- 5. Kayleen Knight, Vital Statistics Clerk

#### **N. APPENDICIES & ATTACHMENTS**

Use this section to add clarifying materials such as key reference documents, flow charts, and diagrams that help the reader understand the document.

800-050-A: Training Needs Assessment

800-900-01-A Required Training Matrix

Resolution 2020-06

Strategic Plan 2021-2023

O. REFERENCE FORMS

N/A.