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PHLN sessions and posters at the 2017  
American Public Health Association  
Meeting and Expo

November 4-8, 2017  
Atlanta, GA



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## Join the Public Health Learning Network at this year's APHA Annual Meeting in Atlanta.

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## 3272.0: Development of the Training Attributes Checklist: A Tool for Assessing Quality Training

Monday, November 6, 2017

Time TBD

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/379807>

### Synopsis

The need for timely, relevant, and lifelong training for the public health workforce has been well established in the literature. The Public Health Learning Network, which consists of a National Coordinating Center, 10 regional sites, and 40 local performance centers has been addressing public health training needs for nearly two decades. Online training opportunities are increasingly becoming an important approach for professional development, yet few standardized approaches exist for assessing the overall quality of public health training delivered online. This presentation will describe the development of the new Training Attributes Checklist, a tool designed to not only measure the overall quality of a training but also the quality of the user experience, based on five key domains. The session will: 1) describe how the tool's items align with existing quality standards, 2) identify the evolution of the tool based on two rounds of pilot testing, and 3) describe the process for using the tool and determining a quality score based on the reviews of 50 trainings delivered by the Public Health Learning Network.

### Learning Areas

- Administration, management, leadership
- Planning of health education strategies, interventions, and programs

### Learning Objectives

- Describe the purpose of the Training Attributes Checklist.
- Identify key domains used to assess quality training.

### Authors

- [Brenda Joly](#)
  - *University of Southern Maine*
- [Fleur Hopper](#)
  - *University of Southern Maine*
- [Jennifer McKeever](#)





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- *National Network of Public Health Institutes*
- [Liljana Baddour](#)
  - *National Network of Public Health Institutes*





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## 3043.0: Designing effective visualizations of public health service delivery data to support decision-making

Monday, November 6, 2017

8:30-10:00 AM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/382528>

### Synopsis

Research objectives: Better access to and understanding of data can support public health leaders' decision-making by examining their performance and resource allocations, and monitoring service delivery and health outcomes. These processes can be facilitated by data visualization tools that provide insight for public health leaders. However, data and visualization needs for supporting public health practice remain largely unexplored. This research aims to describe unmet data visualization needs and to develop a visual dashboard using comparable, local-level data. Methods: We applied a user-centered-design approach to engage our target users (public health leaders) in the development of a visual dashboard. Phone interviews were conducted with 14 public health practitioners from local and state health departments. These interviews identified data needs and preferences for decision-making, and they informed the initial design of the dashboard. A public health dataset of communicable disease services, combined with general demographic characteristics, is used for the dashboard prototype. Results: Most participants in our interviews want better access to and understanding of data with the support of visualizations. Using data visualization helps users to understand and gain insight about the healthcare needs of their communities—which will inform their decision-making—and better communicate those needs to stakeholders and decision-makers. Key features of the dashboard include the ability to compare data among the local health departments or with statewide averages. The prototype is being evaluated in multiple iterations, working with future users to create the final dashboard. Conclusions: The need for better access to and use of data to support evidence-based public health practice is indisputable. There is potential to adapt data science technology to improve public health practice. We will further examine how a visual dashboard can reduce the data need gap and address challenges in public health practice.





## Learning Areas

- Communication and informatics
- Protection of the public in relation to communicable diseases including prevention or control
- Public health administration or related administration
- Public health or related nursing
- Public health or related public policy
- Public health or related research

## Learning Objectives

- Describe unmet needs for data visualization among public health leaders from the local and state health departments.
- Demonstrate to use the visualization dashboard to compare a local health department's activities and services with other similar local health departments within and between states.

## Authors

- [Betty Bekemeier](#)
  - *University of Washington School of Nursing*
- [Seungeun Park](#)
  - *University of Washington School of Nursing*
- [Greg Whitman](#)





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## 3092.0: Making Life Easier: Using Informatics to Prepare for and Respond to Emergencies and Disasters

Monday, November 6, 2017

10:30-11:30 AM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/386565>

### Synopsis

Governmental public health, in collaboration with health care providers and emergency management personnel, contribute to national security by ensuring that the nation's health is protected. Informatics, the science of creating, storing, manipulating, and sharing information for informed decision making, can help attain this goal. Informatics gives the public health workforce tools to make their jobs easier, especially in an environment with workforce capacity and funding stream diminishment. The Mid-Atlantic Regional Public Health Training Center (MAR-PHTC), a member of a national network funded by the Health Resources and Services Administration, focuses on public health informatics and health IT as its area of expertise. This interactive presentation will demonstrate four open access public health informatics tools developed at Pitt Public Health that will aid the public health workforce in preparing for and responding to disasters. FRED is a large-scale agent based model that creates visualizations of how infectious diseases spread based as a function of herd immunity rates. LENA uses network analysis principles to generate network maps of which public health agents are legally directed to work together for emergency preparedness, response and recovery functions. PROJECT TYCHO is a repository of data from all weekly notifiable disease reports for the US dating back to 1988. ELI contains over 1500 laws, searchable by profession and jurisdiction, that impede or facilitate volunteer response to disasters. Participant feedback will be elicited concerning the utility, translation, and future applications of the informatics tools.

### Learning Areas

- Ethics, professional and legal requirements
- Protection of the public in relation to communicable diseases including prevention or control





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- Public health or related research

### **Learning Objectives**

- Describe four informatics tools to help with emergency preparedness and response activities
- Demonstrate how the integration of informatics can improve population health

### **Author**

- [Elizabeth Van Nostrand](#)
  - *University of Pittsburgh*







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## 3198.0: Best Practices for Training Public Health Professionals: A Guide for Planning, Promotion, Implementation and Evaluation

Monday, November 6, 2017

12:30-1:30 PM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/382116>

### Synopsis

Funded in 2014 and headquartered at the Rollins School of Public Health, part of the Region IV Public Health Training Center's (R-IV PHTC) mission is to provide effective, competency-based training to the public health workforce throughout HHS Region IV (GA, AL, FL, KY, MS, NC, SC, TN). Presenters with various backgrounds facilitate trainings on behalf of R-IV PHTC, so there is a need for region-wide quality-control standards and process evaluation methods. R-IV PHTC Central Office staff, with expertise in health education, instructional design, adult learning, communications and evaluation, synthesized best practices and resources for the four major phases of training: planning, promotion, implementation and evaluation. The final product, a five-page Best Practices Training Guide, provides training planners/presenters with a quick reference tool to encourage high-quality programming. A page is devoted to each training phase and lists phase-specific resources. The final page lists all of the references and resources in the entire packet. Any page can also be used as a standalone resource and the digital version contains active hyperlinks. The Training Guide is relevant to any content area and can help planners/presenters improve in-person and online trainings. The Best Practices Training Guide is an accessible, adaptable quality-control tool that can be used by anyone involved in planning or presenting trainings for public health professionals. It can be used as a planning checklist or a process evaluation instrument. The Guide is a concise yet comprehensive overview of top recommendations for effective planning, promotion, implementation and evaluation of public health trainings.

### Learning Areas

- Administer health education strategies, interventions and programs
- Administration, management, leadership





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- Program planning
- Public health administration or related administration
- Public health or related education
- Public health or related organizational policy, standards, or other guidelines

### **Learning Objectives**

- Describe the purpose of the Region IV Public Health Training Center Best Practices Training Guide.
- Identify resources and references for planning, promoting, implementing and evaluating trainings.
- Explain how organizations can use the Best Practices document to enhance the quality of trainings.

### **Authors**

- [Hilary Merlin](#)
  - *Rollins School of Public Health, Emory University*
- [Laura M. Lloyd](#)
  - *Rollins School of Public Health, Emory University*
- [Charita Alston](#)
  - *Rollins School of Public Health, Emory University*
- [Melissa Alperin](#)
  - *Rollins School of Public Health, Emory University*
- [Lisa C. McCormick](#)
  - *University of Alabama at Birmingham School of Public Health*





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## 3273.0: Impactful Data Visualization: Promoting Health Literacy through Infographics and a Collaborative Data Agenda

Monday, November 6, 2017

12:30-2:00 PM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/382829>

### Synopsis

Infographics represent a tool that inspires health literacy for diverse populations, partners, and stakeholders. Impactful public health infographics comprise a core component of the data communication trajectory. Infographics allow trends from large datasets to tell an impactful story. These strategically crafted images can also graphically represent resource and outcomes gaps, strengths and assets, as well as offer the opportunity to effectively communicate the evidence base for solutions. This presentation will demonstrate the vitality of data visualization utilizing seven public health infographics from national peer network and cross-collaboration needs assessments. The infographics reflect

- public health training center needs,
- public health workforce training needs, and
- the impact of public health training centers.

Infographics from a large metropolitan area collaborative needs assessment will also be utilized to demonstrate infographic storytelling on

- healthcare access,
- health disparities,
- chronic diseases, and
- mental and behavioral health.

These illustrative examples convey appropriate data selection, descriptive and engaging textual content, and effective design features as products of a common data agenda in multi-partner collaboration. The Public Health Learning Network (PHLN) is the nation's most comprehensive system of public health educators, experts, and thought leaders. Led by the National Network of Public Health Institutes as the National Coordinating Center (NCC), the PHLN aims to advance public health





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practice and improve population health in the United States. The growing network of ten university-based regional public health training centers and 40 affiliate training centers (or “local performance sites”) focuses on skills-based training in communities across the United States, Puerto Rico, U.S. Virgin Islands, and U.S. territories. The NCC consistently evaluates and reports on PHLN success, in doing so, the utilization of infographics has become a core practice for demonstrating impact.

### **Learning Areas**

- Administer health education strategies, interventions and programs
- Communication and informatics

### **Learning Objectives**

- Compare the utility of descriptive, predictive, and impact data for infographic development.
- Discuss strategies for establishing a common data agenda in peer network and multi-partner collaboration settings.
- Describe characteristics of impactful textual content that promotes clarity and health literacy.
- Define core design components and creative properties of an effective public health infographic.
- Describe the importance of data visualization in public health.

### **Authors**

- [Jennifer Edwards](#)
  - *National Network of Public Health Institutes*
- [Brenda Joly](#)
  - *University of Southern Maine*
- [Fleur Hopper](#)
  - *University of Southern Maine*





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## 3272.0: Piloting a Uniform Chart of Accounts for State and Local Health Departments

Monday, November 6, 2017

1:30-1:50 PM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/377460>

### Synopsis

The purpose of this study is to pilot test a standardized system for reporting financial information in the form of a uniform chart of accounts (COA) that would meet the needs of and be feasible for use by state and local health departments. Current financial reporting systems lack any uniformity, making comparisons of public health investments and their funding sources challenging. Four state health departments and four local health departments in each of the four states (MN, MO, NY, WV) are participating in this pilot study. Participating agencies are completing a crosswalk of financial information from their agencies' general ledger to the uniform COA. Using these data, the research team is generating revenue and expenditure reports for each public health program supplemented by a set of visualizations. In a final step, participating agencies are reviewing the reports and visualizations to verify the validity of the financial data reported and to provide feedback on the utility of the reports and visualizations developed. Key findings from conducting this pilot study include: (1) there is great interest among the practice community in having comparable financial information; (2) implementing a uniform COA for public health agencies is feasible, yet requires a modicum of dedicated financial and human resources; and (3) revenue and expenditure reports and visualizations are useful for practitioners to better understand current spending and corresponding sources of funding. Looking ahead, the uniform COA developed for this study may serve as a blueprint for a standardized financial accounting system that can be adopted by public health agencies across the country. The use of a uniform COA has the potential to support public health leaders and policymakers in determining the funding required to provide public health services in their communities, advocating for additional funding, and understanding how public health investments impact health outcomes.





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### Learning Areas

- Administration, management, leadership
- Public health administration or related administration

### Learning Objectives

- Describe the key lessons learned from a pilot study aimed at implementing a uniform chart of accounts in state and local health departments.

### Authors

- [Betty Bekemeier](#)
  - *University of Washington School of Nursing*
- [Greg Whitman](#)
  - *University of Washington*
- [Simone Singh](#)
  - *University of Michigan School of Public Health*





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## 3317.0: Case Study: Management decisions in local health departments supported by evidence from organizational network analysis

Monday, November 6, 2017

2:30-3:30 PM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/382288>

### Synopsis

The Region 2 Public Health Training Center serves health departments and public health employees in NY, NJ, Puerto Rico and the US Virgin Islands. It is part of a national network funded by the Affordable Care Act through HRSA. In 2016 the Region 2 PHTC offered an intervention consisting of performance feedback in the form of organizational network analysis (ONA) visualizations and measurements that were produced from analysis of an online survey of health department employees. ONA is an extended form of social network analysis that examines inter-relationships between employees, the tasks they perform, and the professional knowledge and resources they use to do their work. The survey results were presented to the health department management team along with detailed information on five broadly applicable evidence-based management strategies. One NJ health department used the ONA results to guide organizational process planning, including task and resource allocation. The results gave the managers insight into a need for communication with more clearly defined purpose and goals. The managers credited the performance feedback they received and the evidence-based strategies they reviewed with focusing them on specific problems and methods to improve communication among employees. They also used the feedback to prioritize management strategies for knowledge transfer between senior staff and newer employees, as a rolling series of staff retirements are expected in the near future. In this poster, we will present specific details of the ONA results and will show how the feedback was used in this NJ health department for long and short term improvement planning and accreditation documentation.



### Learning Areas

- Administration, management, leadership Public health administration or related administration
- Public health or related organizational policy, standards, or other guidelines

### Learning Objectives

- Describe how evidence produced from organizational network analysis can be applied in local health agencies
- List five management strategies that can be used in conjunction with network analysis results.

### Authors

- [Jacqueline Merrill](#)
  - *Columbia University*
- [Colleen Wharton](#)
  - *Rutgers School of Public Health*
- [Marita Murrman](#)
  - *Columbia University Mailman School of Public Health*
- [Melissa Bernstein](#)
  - *Region 2 Public Health Training Center*





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## 3410.0: Development of the Stock Albuterol Inhaler Training for School Personnel: A Course for Use in Pima County Schools

Monday, November 6, 2017

2:30-4:00 PM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/382087>

### Synopsis

The Western Region Public Health Training Center (WRPHTC) worked in cooperation with the University of Arizona's Mel & Enid Zuckerman College of Public Health, the Asthma and Airways Disease Research Center, and the American Lung Association in Tucson, Arizona to develop and implement a training entitled Stock Albuterol Inhaler Training for School Personnel. Many schools in Pima County in Arizona do not have a nurse on-site due to budget constraints and must use nurse delegation procedures for administering medication. Therefore, the goal of this multi-module course is to train non-licensed school personnel in administering stock albuterol to students with asthma. Learners that participate in this course complete five training modules that include; Asthma Basics, Asthma Symptoms, Types of Inhalers, School Action Steps, and Maintenance of the Stock Inhaler. A formal assessment is given at the end of the training and users must demonstrate an 80% proficiency level to receive continuing education which is approved for Certified Health Education Specialists and Registered Nurses. To date 219 individuals from 13 different states have completed the training. 83% of those trained have come from the state of Arizona. This training has had influence in the drafting and approval of Arizona bill HB 2208 which makes it possible for school personnel to legally administer albuterol to students with asthma. This session will demonstrate the importance of inter-professional partnerships in developing and implementing a strategic plan for training the public health workforce to address a serious public health concern in schools.

### Learning Areas

- Advocacy for health and health education
- Public health or related nursing





## Learning Objectives

- Discuss the partnership between organizations in recognizing a public health concern and utilizing shared resources in developing and implementing a strategic intervention to deal with a public health concern.
- Attendees for this group session will:
  - Discuss the process required for building sustainable partnerships between public health organizations.
  - Describe a current training that was developed for school nurses and school personnel to be able to administer albuterol inhalers to students with asthma.
  - Identify the different inter-professional organizations involved in creating an interactive, self-paced training that meets a specific public health concern affecting vulnerable populations.

## Authors

- [Raymond Andrade](#)
  - *University of Arizona*
- [Lynn B. Gerald](#)
  - *The University of Arizona*
- [Donna Bryson](#)
  - *American Lung Association, Tucson Arizona*
- [Lubna Govindarajan](#)
  - *University of Arizona*
- [Erich Healy](#)
  - *University of Arizona*
- [Douglas Taren](#)
  - *University of Arizona*
- [Allison Thomas](#)
  - *University of Michigan School of Nursing*





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## 3337.0: Charting the Course to Public Health 3.0: Cross-sector and Interprofessional Partnerships within the Pathways to Practice Field Placement Program

Monday, November 6, 2017

2:50-3:10 PM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/387757>

### Synopsis

Public health students, who are engaged in experiential learning initiatives that focus on cross-sector and interprofessional partnerships, provide valuable real-world examples of Public Health 3.0. The Region IV Public Health Training Center (R-IV PHTC) fosters future leaders through its Pathways to Practice (PTP) Scholars Program. The R-IV PHTC's Central Office at Emory University, together with six Local Performance Sites at partner universities, places public health students into field placements in medically underserved communities (MUCs) across eight southeastern states. In 2015-2017, over 50 students will have served in positions across R-IV, many crossing state lines from their home academic institutions. Placement sites are state, local, and tribal health departments; Area Health Education Centers; primary care clinics; and community-based organizations. Various examples illustrate that student placements play a critical role in cross-sector collaborations with transportation, business, policy, education, environment, and housing. Interprofessional placement projects with primary care agencies such as an HIV/AIDS clinic, rural family practice, and migrant farmworker program, strengthen the intersection of public health with healthcare. Students also play key roles in advancing health department accreditation by collaborating with coalitions working on Community Health Assessments and Community Health Improvement Plans. The program uses the Council on Linkages Core Competencies for Public Health Professionals. Evaluation instruments include a pre-survey, work plan, post evaluation, and alumni survey. Scholars submit products including a final report and reflection summary. Preliminary pre/post data from the first 36 students shows that Scholars gained the most confidence in the financial planning/management domain (difference: 2.0 on 5-point scale), followed by the cultural competency domain (difference: 1.9). Data also yields qualitative themes





about collaboration, practical skills gained, and plans to work in MUCs. This session provides an overview of the PTP Scholars program, how it advances PH3.0, findings about partnerships and professional development, lessons learned, and resources for others developing similar programs. Experiential learning opportunities can serve as a pipeline to build a competent workforce that is experienced in collaborating across sectors and professions. Students develop core competencies, including tangible partnership-building and community engagement skills, while reinforcing the value of working with MUCs.

### **Learning Areas**

- Administration, management, leadership
- Other professions or practice related to public health
- Public health or related education

### **Learning Objectives**

- Describe student case examples of partnerships across sectors and professions that advance Public Health 3.0.
- Define how the R-IV Public Health Training Center's Pathways to Practice Scholars Field Placement Program uses Council on Linkages competencies to implement and evaluate field placements.
- Discuss evaluation findings from the program regarding partnerships, practical competencies and skills gained, and student plans to work in medically underserved areas.

### **Authors**

- [Michelle Carvalho](#)
  - *Emory University*
- [Laura M. Lloyd](#)
  - *Rollins School of Public Health, Emory University*
- [Lisa C. McCormick](#)
  - *University of Alabama at Birmingham School of Public Health*
- [Elena Kidd](#)
  - *University of Alabama at Birmingham*
- [Paula Masters](#)





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- *East Tennessee State University*
- [Colette Davis](#)
  - *Meharry Medical College*
- [Kathleen R. Miner](#)
  - *Emory University*
- [Melissa Alperin](#)
  - *Rollins School of Public Health, Emory University*





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## 4041.0: Incorporating an integrative approach to interprofessional primary healthcare education

Tuesday, November 7, 2017

9:15-9:30 AM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/381160>

### Synopsis

Clinical and cost effectiveness evidence for integrative healthcare (IH) is accruing; however a shortage of trained IH providers exists. The National Center for Integrative Primary Healthcare was established to address this need. The goal is to transform primary care education to include an emphasis on providing an interprofessional IH approach to patient care. A 45-hour online interprofessional IH course, Foundations in Integrative Health (FIH) was pilot-tested in primary care training programs. Units include: Introduction to IH; Prevention and Lifestyle; Healthcare Professional Wellbeing; Addressing Patients through an Integrative Lens; Integrative Interventions; and Community Settings and Systems. A unit evaluation survey assesses met objectives, educational depth, clinical utility, helpfulness of resources and reflections, and technology. A final evaluation assesses interest in applying IH principles in practice, desire to seek additional IH education, course enhanced educational experience, recommend course, incorporation of self-care practices, and site leader support for completing and relating course to training. Items are rated on a 5-point scale. Based on the course content, established measures of attitudes toward IH approaches, attitudes toward interprofessional collaboration, healthcare provider empathy, self-care behaviors, resiliency, and wellbeing were administered before and after the course. Residents, graduate students, faculty and clinical staff in primary care educational training programs (e.g., family, internal medicine and preventive medicine residencies, nursing, public health, pharmacy, behavioral health, oriental medicine, etc.) and staff and employees of select community health centers were eligible to take the course during the pilot. Course completion was defined as passing an IH medical knowledge test (score  $\geq 70\%$ ) and completing at least 80% of the course content. 679 completed the course. Units were highly rated: met objectives (4.4), technology (4.2), clinical utility (4.1), resources helpful (3.8), reflections helpful (3.8),





educational depth (3.7) and sharing reflections helpful (3.2). A majority (60-73%) recommended incorporating the units. Final survey ratings were also positive: interest in applying (4.5), seek additional IH education (4.3), course enhanced educational experience (4.3), recommend to others (4.2), and leader support for course completion (3.8) and integrating material (3.7). Two-thirds reported incorporating new self-care practices. In addition to demonstrating mastery of IH knowledge, improvements in attitudes toward IH ( $P<0.001$ ) and interprofessional collaboration ( $P<0.003$ ), empathy ( $P<0.001$ ), self-care behaviors ( $P<0.006$ ), resiliency ( $P<0.001$ ), and overall wellbeing ( $P<0.004$ ) were found. The FIH course can serve as a foundation in transforming health education. Online courses address time, cost, and curriculum consistency challenges and can be widely disseminated. Public health is a clinical profession that contributes to IH with a history of embracing interactions between society, culture, medicine and community health. This course provides a foundation on which to build an IH training program.

### Learning Areas

- Administer health education strategies, interventions and programs  
Implementation of health education strategies, interventions and programs
- Other professions or practice related to public health
- Planning of health education strategies, interventions, and programs
- Public health or related education

### Learning Objectives

- Describe how the National Center for Integrative Primary Healthcare addresses gaps in primary care education and resources for training healthcare professionals in Integrative Health.
- Identify the impact of the Foundations in Integrative Health (IH) course on IH knowledge, attitudes toward IH approaches and interprofessional teams, self-care behaviors and wellbeing on across the spectrum of primary and integrative health professionals.

### Authors

- [Audrey Brooks](#)
  - *University of Arizona*
- [Douglas Taren](#)





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- *University of Arizona*
- [Patricia Lebensohn](#)
  - *University of Arizona*







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## 4080.0: Networks and Collaborations in the United States to Address Pediatric Surge Capacity

Tuesday, November 7, 2017

10:30-11:30 AM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/371817>

### Synopsis

This study investigates the current state of pediatric disaster surge collaborations in the United States. The results from two surveys of individuals, agencies, and institutions involved in pediatric care concerning the nature, characteristics, and stages of development of surge networks are reported. Two online surveys using a single-phase, sequential explanatory design and a criterion sampling method were designed. Survey I was sent to pediatric preparedness professionals to (1) identify disaster related collaborative networks, including leadership; (2) assess awareness of and involvement in the networks; (3) collect perceptions of an optimal disaster network; and (4) recruit participants for a second survey. Survey II reported the disaster preparedness capabilities and achievements of each identified network from Survey I and measured interagency collaboration. Descriptive analyses of data to were used to provide an overview of collaborative networks' characteristics. Path analysis was used to model interagency collaboration and identify key factors or domains which facilitated or obstructed collaboration between organizations. Survey I identified 17 disaster-related networks (ten interstate and seven intrastate). Seven networks had achieved Stage 3 of network development, eight were in Stage 2, one network was in Stage 1, and no data was available for one of the interstate networks. Density and intensity of collaboration were also measured. Pre-existing relationships among network participants facilitate interagency processes, and the pursuit of joint activities, such as information sharing, augments interagency processes; these factors working together can assist goal achievement. Environmental factors (the broad political, economic, and social conditions that motivate or mandate interagency relationships) were not influential in the networks identified. This conforms to the analysis revealing that situational factors are the most positive influences to successful interagency processes. This study identified key factors to improve partnerships dedicated to improving healthcare services, delivery and outcomes.

### Learning Areas





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- Administration, management, leadership Public health or related organizational policy, standards, or other guidelines

### **Learning Objectives**

- Identify opportunities to engage with national stakeholders on Federal guidance and policy issues that will impact state and local preparedness.
- Determine the state of pediatric disaster surge collaboration and network development throughout the United States.
- Identify agencies, institutions and organizations involved in the identified pediatric disaster surge collaborations and networks as well as their operational characteristics.

### **Authors**

- [Lauren Wallace](#)
  - University of Alabama at Birmingham
- [Andrew C. Rucks](#)
  - University of Alabama at Birmingham School of Public Health
- [Peter M. Ginter](#)
  - University of Alabama at Birmingham School of Public Health
- [Rongbing Xie](#)
  - The University of Alabama at Birmingham
- [Charles Katholi](#)
  - University of Alabama at Birmingham





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## 4081.1: A Review of the Public Health Learning Network's Needs Assessment Activities: 2014-2016

Tuesday, November 7, 2017

10:30-11:30 AM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/379786>

### Synopsis

Maintaining a capable public health workforce requires ongoing training that is based on current gaps in skills and knowledge. The Public Health Learning Network (PHLN) is a national initiative designed to support workforce development and a key feature of their work focuses on assessing the training needs of public health workers. It consists of a National Coordinating Center (NCC), 10 regional training centers, and 40 local performance sites dispersed across the country. A review of the PHLN's needs assessment activities was conducted in order to identify areas of common practice and to describe the extent to which training needs have been assessed nationally. All regional centers were asked to provide the NCC their needs assessment materials for review. Data were then abstracted to: 1) determine areas of commonality among data collection tools, 2) assess the viability of creating a common set of metrics for adoption among Network members, and 3) describe the type, reach, and scope of needs assessment activities. Overall, 85 products, including 27 data collection tools were reviewed. The findings revealed consistency in the use of a core competency framework, yet there was dramatic variability in how the competencies were assessed. In addition, there was variability in the approach used to assess needs (qualitative versus quantitative), the type of data collected, and the audiences engaged throughout the network. Recommendations for standardizing and expanding public health workforce needs assessment efforts will be discussed.

### Learning Areas

- Assessment of individual and community needs for health education
- Program planning





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## Learning Objectives

- Describe the types of training needs assessment activities used across the Public Health Learning Network. Explain the challenges of standardizing data collection efforts across a Network Identify one approach for standardizing data collection efforts.

## Authors

- [Brenda Joly](#)
  - *University of Southern Maine*
- [Fleur Hopper](#)
  - *University of Southern Maine*
- [Brittany Bickford](#)
  - *National Network of Public Health Institutes*
- [Aaron Alford](#)
  - *National Network of Public Health Institutes*





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## 4273.0: Differences in Determinants of Health and Disease Burden among Populations Served by PHAB Accredited and Non-Accredited Public Health Agencies at the County Level

Tuesday, November 7, 2017

2:30-3:30 PM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/378855>

### Synopsis

In 2011, the Public Health Accreditation Board (PHAB) was formed to create a national accreditation process for state and local public health departments. The central goal of PHAB accreditation is to increase quality improvement efforts, strengthen organizational capacity, and develop the public health workforce of participating departments in order to improve health indicators and reduce health disparities. However, little research has been conducted to address if the PHAB accreditation process may be disproportionately aiding departments whose populations are already socially or economically advantaged. To determine if populations served by accredited departments were more advantaged, a cross-sectional research study was undertaken to examine differences in fundamental causes of health as well as disease burden among populations served by accredited and non-accredited departments. Using data from the United States Census Bureau, County Health Rankings, National Association of County and City Health Officials, and PHAB, nine indicators of social and economic determinants of health and disease burden were collected for 186 counties served by accredited and non-accredited departments with county-level jurisdiction. The findings of this study will assist PHAB's decision makers in creating policies to make the accreditation process more equitable for departments serving populations with higher rates of disease burden and will help ensure that the PHAB accreditation process is consistent with public health goals of improving population health equity.

### Learning Areas

- Conduct evaluation related to programs, research, and other areas of practice
- Public health or related organizational policy, standards, or other guidelines





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- Public health or related research

### **Learning Objectives**

- Describe differences in populations served by accredited and non-accredited public health agencies in terms of determinants of health and chronic disease burden.
- Evaluate differences in social determinants of health, economic determinants of health, and disease burden among populations served by accredited and non-accredited public health agencies to inform accreditation policy.

### **Author**

- [Samantha Cinnick](#)
  - *Columbia University Mailman School of Public Health*





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## 4400.0: Workforce Training Needs Panel Session

Tuesday, November 7, 2017

4:30-4:50 PM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/387867>

### Synopsis

Online trainings provide a means to address ongoing professional development needs to prepare the public health workforce. There is no shortage of online trainings available. However, quality of the offerings can vary widely. Despite recent efforts to develop quality standards for online training, there is no consistent approach or systematic tool for assessing the quality of public health training inclusive of the user experience. Furthermore, rarely are end users – public health practitioners in this case – asked to help shape a quality review tool or review trainings for quality. A study conducted in collaboration between the National Network of Public Health Institutes (NNPHI) Public Health Learning Network (PHLN), the Public Health Foundation, and the de Beaumont Foundation, has changed that. Practitioners were assigned to review a sample of online trainings offered through TRAIN.org using a newly developed quality review tool: PHLN's Training Attributes Checklist. Rather than asking what the training does, it asks the learner what they experienced in five key domains. This tool has been tested by public health practitioners representing multiple institutions to assess the quality of the user experience in completing online training as well as a tool to inform development of trainings. The PHLN Training Attributes Checklist is part of a larger initiative of a Learning Navigator, investing in the workforce with a curated experience linking learners to their training needs. This session will describe the need for this PHLN tool, explain the pilot test results and discuss the implications of those findings in the larger context.

### Learning Areas

- Administer health education strategies, interventions and programs
- Assessment of individual and community needs for health education
- Public health or related education

### Learning Objectives





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- Describe the need for the PHLN Training Attributes Checklist tool.
- Explain the pilot test results of using the PHLN tool.
- Discuss implications of using the PHLN tool.

#### **Author**

- [Liljana Baddour](#)
  - *National Network of Public Health Institutes*







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## 4430.0: Communities of Practice as a Workforce Development Tool

Tuesday, November 7, 2017

4:30-6:00 PM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Session/52193>

### Synopsis

This session will highlight how members of the Public Health Learning Network have been employing different community of practice approaches to provide public health professionals with valuable professional development opportunities that fall outside of the traditional "training" bounds. Each of the four organizations will present unique elements of their communities of practice approach, provide evaluation data, and lessons learned regarding various aspects of managing communities of practice.

### Learning Objectives

- Identify multiple approaches to establishing communities of practice
- Describe successful approaches to structuring and facilitating communities of practice
- Describe benefits of using communities of practice as a workforce development tool

### Presentations

- [4430.0 Using Communities of Practice and technology to support professional connections and reduce isolation among public health professionals](#) *Sarah Davis, MNM<sup>1</sup>, Christine Cook, MS<sup>1</sup> and Kathleen Butterfield, PhD<sup>2</sup>, (1)Colorado School of Public Health, Aurora, CO, (2)CO*
- [4430.0 Addressing complex public health and healthcare problems by enhancing connection and peer learning through virtual Communities of Practice](#) *Korrine Thomas, MPH, Colorado School of Public Health, Aurora, CO and John F Thomas IV, PhD, MSSW, University of Colorado School of Medicine, Aurora, CO*
- [4430.0 Using Community of Practice Strategies to Build a High-Functioning Network](#) *Dorothy Sekowski, MPH, MEd, National Network of Public Health Institutes,*





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*New Orleans, LA and Jennifer McKeever, MSW, MPH, National Network of Public Health Institutes, Washington, DC*

- [4430.0 Building Capacity toward Enhanced Learning Engagement through Communities of Practice](#) *Elizabeth Jarpe-Ratner, MPH, MST, PhD Candidate<sup>1</sup>, Sophie Naji, MPH<sup>2</sup>, Michael Bisesi, PhD<sup>3</sup>, Christina Welter, DrPH, MPH<sup>4</sup>, Phoebe Goldberg, MPH, CHES<sup>5</sup>, Devangna Kapadia, MS MPH<sup>1</sup>, Lois Hall, MS<sup>6</sup>, Sandra Whitehead, PhD<sup>7</sup>, Adam London, RS, MPA<sup>8</sup> and Sydney Fouche<sup>1</sup>, (1)University of Illinois at Chicago, Chicago, IL, (2)University of Illinois at Chicago, School of Public Health, Chicago, IL, (3)Ohio State University, Columbus, OH, (4)Univ of Ill at Chicago, School of Public Health, Chicago, IL, (5)University of Michigan School of Public Health, Ann Arbor, MI, (6)Ohio Public Health Association, Columbus, OH, (7)National Environmental Health Association, Washington, DC, (8)Kent County Health Department*





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## 4402.0: Integrating Public Health and Health Care: Using Informatics to Improve Population Health

Tuesday, November 7, 2017

4:50-5:10

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/386530>

### **Synopsis**

Community Health Centers (CHCs) provide a safety net for the nation's most vulnerable populations. Over 66% of CHC clients are racial or ethnic minorities. Seventy-five percent are uninsured or Medicaid recipients. Population-based and targeted approaches are required to address social determinants of health and achieve health equity. When CHCs embrace health IT, health care quality, safety and efficiency is improved and health disparities may be diminished. The Mid-Atlantic Regional Public Health Training Center (MAR-PHTC), a member of a national network funded by the Health Resources and Services Administration, focuses on public health informatics and health IT as its area of expertise. MAR-PHTC partnered with the Pennsylvania Association of Community Health Centers (PACHC) to increase the use of informatics in clinical practice thereby enhancing the capacity of CHCs to impact population health. MAR-PHTC conducted key informant interviews of CHC leadership to assess training needs. Findings indicated that CHC leadership and staff receive little formal health IT and informatics training. Gaps were identified with respect to GIS, data analytics, Meaningful Use Stage 3, work flow standardization, and the identification of credible data sources. Additional recommendations included training on data visualization, work flow standardization, the identification of credible data sources, and the utilization of the Uniform Data System Mapper Tool. Multiple centers cited the inability to assess community health data due to the lack of population-specific data from both internal assessments and comparable external data. MAR-PHTC developed a training protocol that is replicable nationwide. MAR-PHTC created a training plan targeting identified informatics needs to increase their use in clinical care and improve health outcomes. A synchronous interactive webinar for level setting and further exploration of training needs and interests was created.





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Subsequent training opportunities were developed using both distance-accessible and in-person modalities.

### **Learning Areas**

- Communication and informatics

### **Learning Objectives**

- Describe how needs assessments can be used to identify gaps in informatics
- Explain how informatics tools can help to achieve health equity
- Replicate a training paradigm for community health centers
- Analyze best practices of academic/clinical partnerships

### **Author**

- [Elizabeth Van Nostrand](#)
  - *University of Pittsburgh*





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## 5049.0: Training School Nurses on Asthma Protocol in NYC

Wednesday, November 8, 2017

8:30-10:00 AM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/382011>

### Synopsis

School nurses in New York City deliver essential, direct care to the 1,000,000+ students in the public school system. In partnership with the New York City Department of Health and Mental Hygiene, the Region 2 Public Health Training Center (PHTC) developed 4 online modules for NYC school nurses related to understanding, assessing, responding to and care management of asthma. For school nurses, building in time during the school day to complete trainings is difficult, and organizing an in-person training can be largely dependent on the school calendar in addition to cost intensive. The purpose of this session is to enable the learner to better understand how distance-based trainings can be utilized to create and maintain an informed, competent school nurse workforce. To accomplish this, the presenter will describe the process of creating the modules, beginning with the health problem of increased asthma-related morbidity and mortality among NYC public school students, and walking learners through the instructional design process which included Continuing Nursing Education (CNE)-accreditation. Finally, the presenter will discuss the preliminary training evaluation results, including an average 10% increase in knowledge, and other evaluation metrics.

### Learning Areas

- Administer health education strategies, interventions and programs
- Chronic disease management and prevention Implementation of health education strategies, interventions and programs
- Public health or related nursing

### Learning Objectives





- Describe the importance of school nurses in New York City public health practice.
- Explain how evidence-based protocol training for school nurses was developed using distance-based technology.
- Discuss preliminary results from training evaluation findings.

## Authors

- [Melissa Bernstein](#)
  - *Region 2 Public Health Training Center*
- [Anne Brennan](#)
  - *Office of School Health: New York City Department of Health and Mental Hygiene*
- [Maria Cunningham-Johnson](#)
  - *Office of School Health: New York City Department of Health and Mental Hygiene*
- [Helen Aguila](#)
  - *New York City Department of Health and Mental Hygiene*
- [Jean Sale-Shaw](#)
  - *Center for Health Equity, NYC Department of Health and Mental Hygiene*
- [Gail Adman](#)
  - *Office of School Health: New York City Department of Health and Mental Hygiene*
- [Shwetha Bhaskar](#)
  - *Earth Institute, Columbia University*
- [Calaine Hemans-Henry](#)
  - *New York City Department of Health and Mental Hygiene*
- [Marita Murrman](#)
  - *Columbia University Mailman School of Public Health*





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## 5066.0: Effects of Climate Change on Health Disparities in the Eastern Caribbean

Wednesday, November 8, 2017

10:50-11:00 AM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/380265>

### Synopsis

Human activities have led to rapid emissions of Greenhouse Gases, which are linked to changing weather patterns, temperatures and overall climate change. Specific to the Caribbean, there will be an increase in temperature, a rise of sea levels and extreme weather events causing specific challenges for farms and fisheries. Health disparities including hypertension, diabetes and cancer associated in part by diet and the environment may be increased through the effects of climate change. Recent challenges in the region such as the Zika virus and the Dengue fever caused by mosquitoes are also affected by climate change. This presentation will explore the unique challenges associated with climate change and food security for small island states. It will further discuss the potential effects on health disparities and provide potential mitigation strategies.

### Learning Areas

- Other professions or practice related to public health
- Planning of health education strategies, interventions, and programs
- Public health or related research

### Learning Objectives

- Identify the unique effects of climate change on health disparities in the Eastern Caribbean
- Describe specific disparities in the US Virgin Islands Discuss strategies to mitigate the climate change effects on the health disparities

### Author

- [Ilene Heyward-Garner](#)

*University of the Virgin Islands Community Engagement and Lifelong Learning Center*



## 5157.0: Using Multiple Data Sources to Assess the Health of a Network

Wednesday, November 8, 2017

12:30-12:50 PM

<https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/387514>

### Synopsis

The Public Health Learning Network (PHLN) is a national initiative funded by the Health Resources and Services Administration. The Network is comprised of 10 regional public health training centers and 40 local performance sites. The PHLN is convened by the National Coordinating Center for Public Health Training (NCCPHT), housed at the National Network of Public Health Institutes. One of the NCCPHT's main charges is to conduct an evaluation of the PHLN, including measuring the Network's functionality. To do so they implemented two data collection processes: 1) a Network Health Scorecard, a quantitative tool designed to measure Network performance and operations, and 2) a set of key informant interviews with Network stakeholders to identify successes and opportunities for improvement. Preliminary findings show that members feel they are achieving more together than they could alone. This session will explore the strength of the two data sources and the way the data complement one another to lead to a comprehensive understanding of the Network's capacities. Potential future applications of the Scorecard and interview methodology will be explored.

### Learning Areas

- Conduct evaluation related to programs, research, and other areas of practice

### Learning Objectives

- Describe the Public Health Learning Network Evaluation goals and objectives.
- Identify the opportunities of using two data sources to understand a Network's functioning.
- Explain findings from the Network Scorecard and key informant interviews.





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- List one way the Scorecard and interview methodology could be applied to another Network.

### Authors

- [Brittany Bickford](#)
  - *National Network of Public Health Institutes*
- [Brenda Joly](#)
  - *University of Southern Maine*
- [Fleur Hopper](#)
  - *University of Southern Maine*

