



**PUBLIC HEALTH
LEARNING NETWORK**

Educating Professionals,
Elevating Practice.

Public Health Learning Network

**Sessions and posters at the 2018
American Public Health
Association Meeting and Expo**

Find us in booth 1220 and check out all of our sessions and posters at this year's meeting.

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5152.0: Improving Diabetes Care through the ECHO model in Federally Qualified Health Centers

Wednesday, November 14, 2018

01:10 PM - 01:30 PM

<https://apha.confex.com/apha/2018/meetingapp.cgi/Paper/418858>

Background

Federally Qualified Health Centers (FQHCs) are increasingly burdened with addressing the rising morbidity and mortality associated with chronic health conditions, including diabetes. Care coordination has emerged as a fundamental vehicle for chronic disease management while accounting for the needs and preferences of clients. Thus, FQHCs are training workforces to deliver care coordination services as a part of the medical home. Methods: ECHO Colorado offered two learning series, with five sessions each, for Care Coordinators in FQHCs serving clients with diabetes. Impacts of the learning series were measured using online retrospective pre/post surveys. Assessment measures included self-efficacy ratings for the learning objectives, participant satisfaction, intent to make practice changes, and perceived barriers. The following data are from 26 (49.1%) of the 53 total participants who completed an evaluation survey. Comparisons of pre/post self-efficacy (1 to 5 Likert scale) were conducted through paired t-tests. Effect sizes were assessed using Cohen's d statistics. Results: Participants reported significant improvements in self-efficacy for the four learning objectives ($P < .001$; $d = 0.9$ to $d = 1.3$). Overall self-efficacy increased by 22.8% from 2.9 to 3.6 ($P < .0001$; $d = 1.1$). 96.2% agreed the ECHO series made them better at their job. 88.5% identified actions to apply new knowledge. Conclusion: The ECHO series demonstrated meaningful outcomes for improving care coordinators' self-efficacy to support clients with diabetes. While diabetes was used as an example, the curriculum also helped participants translate their knowledge and skills to the management of other chronic diseases. Thus, the ECHO model will likely improve overall chronic disease management as well.

Learning Areas

- Advocacy for health and health education
- Chronic disease management and prevention
- Conduct evaluation related to programs, research, and other areas of practice
- Planning of health education strategies, interventions, and programs
- Provision of health care to the public
- Public health or related education

Learning Objectives

1. Describe the ECHO (Extension for Community Health Outcomes) Colorado model
2. Describe how a Care Coordination Diabetes ECHO Series can improve the self-efficacy of licensed and non-licensed Care Coordinators to assist patients at-risk for or managing a chronic disease
3. Describe the key components of a successful care coordination-focused ECHO: including building community partnerships, curriculum development, course delivery, participant engagement, and evaluation

4. Discuss future opportunities for applying the ECHO model to expand and improve services for clients at-risk for developing or managing chronic diseases

Authors

- **Michelle Guthrie**- Rocky Mountain Public Health Training Center
- **Jen Anderson**- Community Health Association of Mountain/Plains States (CHAMPS)
- **Suzuho Shimasaki**- Extension for Community Health Outcomes (ECHO) Colorado
- **Erin Bishop**- Extension for Community Health Outcomes (ECHO) Colorado
- **Marisa Faye**- Extension for Community Health Outcomes (ECHO) Colorado
- **John F Thomas**

4118.0: Implementing Public Health 3.0: Working across sectors to establish an academic health department and develop the public health workforce

Tuesday, November 13, 2018
10:50 AM - 11:10 AM

<https://apha.confex.com/apha/2018/meetingapp.cgi/Paper/407865>

Background

The Washington State Department of Health (DOH), as led by Chief Health Strategist, Secretary of Health John Wiesman, is implementing the Public Health 3.0 framework through strong partnerships to train the next generation of public health professionals. Staff in the agency's Community Relations and Equity group do this by engaging with non-governmental partners, from academia to community-based organizations, while implementing an agency-wide plan to advance health equity. This work also includes the creation of an academic health department, with support from a cross-agency Academic Guidance Team (AGT). This presentation will review the work of the AGT and how they've built connections with academia, increased engagement with students, enhanced professional development opportunities for existing staff, and strengthened the evidence-based public health practice within the agency. Creating an academic health department work plan has led to connections with universities and colleges across the state and, in particular, a stronger relationship with the Northwest Center for Public Health Practice (NWCPHP) at the University of Washington. This presentation will focus on how DOH and NWCPHP have collaborated to formalize guest lecturing opportunities for existing health department staff and created an internship program to raise student awareness of public health, which can activate the next generation of young professionals. Both activities provide a unique and helpful perspective on how academic and practice communities can partner. This presentation will also review the importance of integrating a health equity lens throughout this work and how establishing a formalized student internship program provides a more equitable process to help recruit diverse candidates in a health department. We will also discuss how NWCPHP and AGT members are furthering the education of current agency staff through the creation of evidence-based public health trainings. Staff across the agency, including those working in IT, finance, and human resources will gain basic knowledge about public health and health equity principles to integrate into their daily tasks. The online courses will also be made public and shared with local jurisdictions and other interested partners to enhance our statewide health systems.

Learning Areas

- Administer health education strategies, interventions and programs
- Diversity and culture Public health administration or related administration
- Public health or related education
- Public health or related organizational policy, standards, or other guidelines
- Systems thinking models (conceptual and theoretical models), applications related to public health

Learning Objectives

1. Explain the importance of using a health equity lens to frame discussions around public health workforce development and academic engagement.

2. Discuss the importance of executive support (chief health strategist and state health officer-executive sponsor) for academic engagement and workforce development initiatives.
3. Identify three concrete ways public health organizations can engage a wide breadth of partners, both within and outside an organization, for workforce development activities.
4. Review a sample work plan and methods for setting attainable goals to establish an academic health department partnership between multiple organizations.

Authors

- **Barbara Rose-** Northwest Center for Public Health Practice
- **Paj Nandi-** Washington State Department of Health
- **Megan Mikkelsen**
- **Betty Bekemeier**

3089.0: Deconstructing Online Content for Post-Hurricane Maria Puerto Rico: Rapid Response Public Health Campaign by Public Health Training Centers

Monday, November 12, 2018
10:30 AM - 11:30 AM

<https://apha.confex.com/apha/2018/meetingapp.cgi/Paper/407825>

Background

To meet urgent public health needs in Puerto Rico after Hurricane Maria, the Public Health Learning Network (PHLN) identified, deconstructed, translated, and distributed priority public health information despite severely limited power and telecommunications. Within the PHLN, the Region 2 Public Health Training Center (PHTC) and its partner in Puerto Rico, Impactivo, were responsible for identifying high-priority public health needs on the island and managing communication between response partners. Additionally, The Region 1 New England PHTC was responsible for identifying available preparedness materials. When materials were unavailable, additional regional PHTCs in the PHLN offered subject matter expertise. Using this framework, the PHLN and its partnerships launched a three-week work-plan which resulted in 17 Spanish-translated factsheets on public health content related to hurricane response and recovery. These factsheets became the basis of a paper, radio, and internet-based public health media campaign in Puerto Rico managed by the Puerto Rico Department of Health and Centers for Disease Control and Prevention via Impactivo. Implementation of the campaign between January and March of 2018 included the distribution of 500 brochures, 200 posters, three 30-second radio segments, quarter-page newspaper ads, and weekly social media posts. A major challenge of this response included a notable shortage of non-internet based, Spanish training that demonstrated that the national movement towards online training may be disadvantageous in some disaster recovery situations. Overall, this collaboration presents a potentially replicable short-term response after natural disasters where a strong subject matter network with local partners can generate quick outcomes in a cost-effective manner.

Learning Areas

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

Learning Objectives

1. Name the components of the Public Health Training Center network response that led to the development of a public health media campaign.
2. Explain the importance of using decentralized funding approaches via a strong subject matter expert network and local public health partner to generate quick outcomes in a cost-effective manner.

Authors

- Samantha Cinnick- Columbia University Mailman School of Public Health
- Marita Murrman
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4068.0: Advocating for collective action to increase food security among immigrants: An online training for the public health workforce

Tuesday, November 13, 2018
09:05 AM - 09:20 AM

<https://apha.confex.com/apha/2018/meetingapp.cgi/Paper/407565>

Background

While immigrant access to public benefits has long been the subject of national debate, intensified anti-immigrant policies and threats to restrict food and other assistance programs have increased existing barriers to healthy, affordable food among low-income immigrants. Due to limited human and financial resources, siloed programming, and limits on public employees' political advocacy, health departments and other public agencies usually rely on downstream strategies such as educational campaigns to reduce immigrant food insecurity, rather than taking on the root causes of this issue. As part of a national online health equity training curriculum, a course was developed to help health department workers overcome these barriers by (1) expanding their practice to promote health equity by supporting immigrant access to healthy food; (2) identifying underlying causes of food insecurity among immigrants, including exclusionary eligibility restrictions, repressive immigration enforcement, and poverty wages; and (3) leveraging the strength of existing community coalitions and political and social movements through partnerships that promote immigrant inclusion, fair labor, and other political and living conditions that promote immigrants' health. The training focuses on case examples of concrete strategies used by state and local health departments and community partners, with opportunities for learners to reflect on their own work and develop practical action plans. This approach, which is currently being evaluated, reinforces the value of smaller-scale strategies, while advocating that collective action can help health departments amplify their efforts, maximize their resources, and serve immigrant populations more effectively than when they act alone.

Learning Areas

- Public health or related education

Learning Objectives

1. Describe curriculum development strategies that encourage local and state health department staff to adopt upstream approaches in promoting immigrant health equity.
2. Demonstrate how to link political context with social and health inequities in pedagogical materials for public health workers with varying social and political views.
3. Formulate curriculum that applauds small-scale health department efforts while making the case that collective action can be a resource-efficient way to increase impact.

Authors

- **Emilia Vignola**- City University of New York Graduate School of Public Health and Health Policy
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3232.0: Shared Learning: Building upon New Jersey's Past Success

Monday, November 12, 2018
01:20 PM - 01:40 PM

<https://apha.confex.com/apha/2018/meetingapp.cgi/Paper/426195>

Background

This presentation will describe the unique partnership in New Jersey which was formed several years ago amongst statewide public health organizations, including NJ Association of County and City Health Officials, NJ Department of Health, NJ Public Health Association, and Rutgers Center for Public Health Workforce Development. With a commitment to quality improvement in public health, these partners – both collectively and independently – have actively supported and advanced accreditation-related efforts in the state, through a variety of collaborative learning efforts. The specific efforts under the Accreditation Readiness grant from APHA and its impact will be described, highlighting successes and challenges among NJ's local public health agencies.

Learning Areas

- Public health administration or related administration
- Public health or related laws, regulations, standards, or guidelines
- Public health or related organizational policy, standards, or other guidelines

Learning Objectives

1. Assess the impact of state and regional public health associations support of state and local accreditation readiness

Authors

- Colleen McKay Wharton- Rutgers School of Public Health

4449.0: Building Cross-Cultural Communication Skills in Public Health Professionals: An In-demand and Impactful Training from the Region IV Public Health Training Center

Tuesday, November 13, 2018
05:45 PM - 06:00 PM

<https://apha.confex.com/apha/2018/meetingapp.cgi/Paper/418597>

Background

As the U.S. becomes increasingly racially and ethnically diverse, the ability to communicate across cultures is more critical than ever. To help public health agencies meet the needs of their diverse populations, the Region IV Public Health Training Center (R-IV PHTC) developed an interpersonal communication skills-based training called Communicating Across Cultures. The purpose of this training is to provide public health professionals with the knowledge and skills to improve cross-cultural communication and the provision of culturally competent services. The R-IV PHTC has implemented the training in a variety of ways to meet the particular needs of requesting agencies. This session will explain the evolution of the Communicating Across Cultures training, from conception to its status as R-IV PHTC's most requested training. The presenter will provide an overview of the six-hour training and key content addressed, including legal, professional, and ethical imperatives for providing culturally and linguistically competent services. Additionally, participants will briefly be introduced to the two major communication strategies covered in the workshop: the LEARN Model for cross-cultural communication and a set of practice guidelines for working with medical interpreters. The evaluation process will be shared along with preliminary findings. Early results show that upon completing Communicating Across Cultures, 89% of participants identify actions they will apply in their work and up to six months after attending, 57% of participants are already using strategies from the training on the job.

Learning Areas

- Communication and informatics Implementation of health education strategies, interventions and programs
- Other professions or practice related to public health
- Provision of health care to the public
- Public health or related education

Learning Objectives

1. Explain the need for training for public health professionals in providing culturally and linguistically competent services;
2. Describe the design and content of the Region IV Public Health Training Center's Communicating Across Cultures training;
3. Describe the process and key results of the Communicating Across Cultures training evaluation.

Authors

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3060.0: Improving Health Equity through Service and Training: The Wisconsin Population Health Service Fellowship Program Case Example

Monday, November 12, 2018
08:50 AM - 09:10 AM

<https://apha.confex.com/apha/2018/meetingapp.cgi/Paper/414704>

Background

In order to build the capacity of a new generation of leaders to advance health equity, efforts need to operationalize goals and curriculum. The Foundational Practices for Health Equity provides a framework to increase understanding, shift attitudes and build practical skills towards expanding the understanding of what shapes health, assess and influence the policy context, use data strategically, continuous learning, successful partnership and community capacity building, and assure strategic and targeted use of resources. The Wisconsin Population Health Service Fellowship Program, a 2 year service and training program designed for masters prepared individuals in public health and allied sciences, has designed its curriculum around health equity, collaborative leadership, service and mentorship. The 13 year old program has supported 64 graduates in over 40 of placements sites. The program provides advanced training to the next generation of public health leaders while, concurrently, providing direct service to community partners to address Wisconsin's most pressing public health challenges. Fellows and the organizations they serve will advance their capacity to plan, implement, and evaluate innovative strategies for population health improvement. As the program approaches its 14th year, an explicit focus on health equity leadership will be included. Systematic training around health equity and collaborative leadership allows for trainees to build their capacity in framing their work and through the lens of health equity. The new curriculum will include historical perspectives on the role of policies in shaping health inequities, coalition capacity building, grassroots partnership development skills, and reflective practice.

Learning Areas

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

Learning Objectives

1. Describe the structure and model for training early career professionals in public health leadership and health equity.
2. Describe why public health training programs are focusing on Health Equity as the cornerstone of their curriculum
3. Describe strategies for integrating health equity in public health training curriculums.

Authors

- Sweta Shrestha- University of Wisconsin Population Health Institute
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