

# Public Health Summer Academy (PHSA):

Evaluation of a Public Health Workforce Development Program in 2012 & 2013,

University of Tennessee, Knoxville & East Tennessee Regional Office

Report for John J. Dreyzehner, MD, Tennessee Department of Health Commissioner

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## Public Health Summer Academy (PHSA)

### Executive Summary

**Program:** Eighteen East Tennessee Regional Office (ETR) employees representing five counties and the Regional Office participated in the second annual Public Health Summer Academy (PHSA) July 22-26, 2013. This was two more participants than in 2012. The PHSA involved 20 hours of educational sessions (Monday-Friday from 8 a.m. to noon each day) in basic public health knowledge and skills.

The PHSA was collaboratively planned by employees from ETR and the University of Tennessee (UT) Department of Public Health (DPH), and funded by East Tennessee State University's Public Health Training Center. The UT Department Head, a former ETR Regional Director, taught the first session on Evidence-Based Public Health, as well as facilitated discussions at the beginning and end of each session highlighting the relevance of each day's topic to ETR. Four UT Public Health faculty taught the remaining sessions.

Reasons employees enrolled included: to increase public health knowledge/skills (56%), considering an MPH or related degree (19%), to benefit their job (11%), heard positive comments from last year's participants (8%) and to impact local community (6%). Participants were required to write a 3-4 page reflection paper 1 month after the course's completion on how PHSA will improve their job performance.

**Evaluation** was highly positive. In both 2012 & 2013, 100% agreed or strongly agreed that PHSA was a good use of time; 80% said PHSA stimulated their interests in pursuing additional course work or a degree in public health; 100% would recommend PHSA to a colleague. According to 2012 participants' reflection papers, the most common knowledge and skill application was *community partnering and outreach*, while in 2013 *evidence-based practices* was the most common. In both years, faculty reported learning valuable lessons from practitioners' experiences and gained insights about local public health practice.

## Improvements in 2013

- Used **Survey Monkey** for pre- & post-assessment, making submission and analysis easier
- Added **evidence-based public health (EBPH) framework**



- Increased amount of **group work**



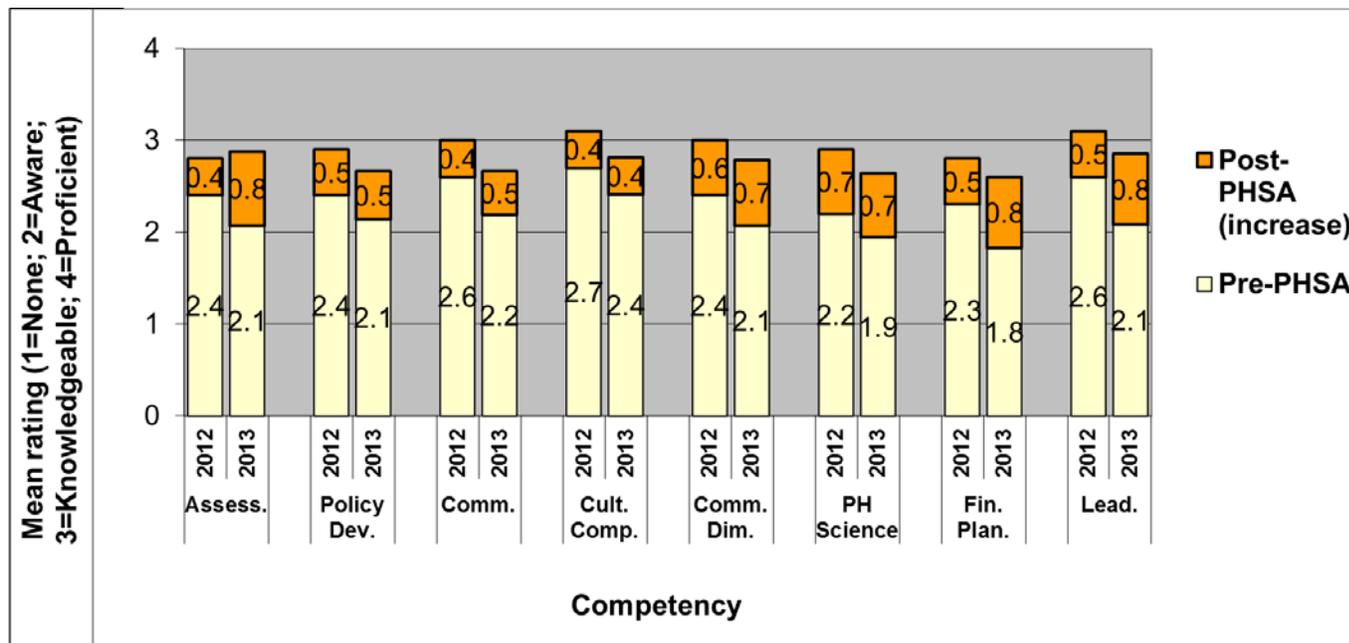
- **Laptops** used for culminating small group activity to locate county health data, use it to design EBPH programs, and present to class



- Added end-of-week **luncheon** to celebrate and network

**Pre and Post PH Competency Assessments** showed the average rating for all competencies increased in 2012 (by 0.4-0.7 points) and 2013 (by 0.4-0.8 points), indicating that both years' groups moved from "aware" toward "knowledgeable" (Figure 1).

**Figure 1. Average Rating for Pre and Post Competencies, 2012 & 2013**



**Favorite aspects:** In both 2012 and 2013, participants suggested continuing the week-long format with half-day sessions at UT to allow uninterrupted training in the morning, yet preserve work time for employees in the afternoons. Participants especially liked the diversity of faculty presenters, as well as variety of participants, which enhanced the learning experience by understanding each other's roles and perspectives. Small class size, having PowerPoint materials in advance, and snacks also were felt to have contributed to the learning experience.

In 2013, the most popular parts were meeting others in the ETR (networking and learning what others do) and the variety of speakers with real life experience. Individuals also specifically mentioned liking the following:

- daily introductions & reviews
- group work
- mix of lecture and interaction
- learning about PH outside local level
- breaks
- comfortable room without distractions
- coordination of program

**Future Directions:** Feedback from participants and instructors was highly positive both years. With the previous funding for PHSA (LIFEPATH's Public Health Training Center) no longer, the DPH/UT will explore other options for funding. Although this may pose challenges, the DPH/UT is committed to providing another PHSA opportunity in 2014, with the possibility of including public health practitioners from other (nearby) TDH Regions. The sessions and learning strategies will continue to be improved based on participant feedback, including maintaining the EBPH framework and maintaining or expanding use of laptops.