DEPARTMENT OF HEALTH

All Capabilities (except EPR)

DRAFT DEFINITIONS AS OF APRIL 2025

CONTENTS

Accountability and Performance Management

Category A: Ability to perform business and public health practices in alignment with applicable federal, state, and local laws, policies, and Public Health Accreditation Board standards and practices.

1. Establish a system for tracking efforts toward agreed upon responsibilities, and monitor actions taken by governmental public health, and partners.
2. Develop, implement, and maintain systems and infrastructure for organizational performance management.
3. Regularly review and apply all relevant federal, state, and local laws, policies, and accreditation requirements affecting public health practice.

Category B: Ability to maintain a performance management system to monitor achievement of organizational objectives and an organization-wide quality improvement culture.

1. Develop, implement, and maintain a documented process for creating performance management metrics. This may include a written performance management plan.
2. Establish reliable, high-quality, and actionable metrics to monitor performance and drive continuous improvement.
3. Develop performance management plans for all teams, including data collection, analysis, and reporting, and establish a centralized system for storing and accessing performance management data.
4. Develop, implement, and maintain a written quality improvement plan (according to public health accreditation board guidance, Domain 9).

5. Cultivate an organizational culture of quality improvement (including but not limited to: leadership commitment, QI infrastructure, employee empowerment, customer-focus, etc. Elements of a QI Culture - Roadmap to a Culture of Quality Improvement)
6. Establish metrics and monitor quality of the governmental public health system.
7. Use performance data to inform decision-making.

Category C: Ability to identify or use best available evidence when implementing new or revised processes, programs and or/interventions.

1. Build capacity and competency for reviewing research and literature.
2. Establish and document a process to review evidence-based, promising, and theory- or research-informed practices when a program or intervention is developed or revised.
3. Customize or adapt to ensure the practice is tailored to the community.
4. Build organizational and staff competency in evaluation.
5. Make decisions for improvements based on the evaluation of a program, process, or intervention.
6. Use evaluation data to test and refine new and innovative approaches.

Category D: Ability to measure the impact of governmental public health's contribution to improving health equity.

1. Use disaggregated performance data to identify disparities and prioritize areas for improvement.
2. Develop, implement, and maintain a system to gather feedback from groups affected by performance management goals to ensure their perspectives inform decision-making.
3. Engage and share data findings with affected groups and interested parties. This could include activities such as reporting on progress, facilitating discussion to encourage data use, or gathering additional insights for interpretation of findings.
4. Develop shared equity measures across the governmental public health system.

Assessment and Surveillance

Category A: Ability to use data to guide public health planning and decision making.

1. Develop, implement, and maintain an information technology infrastructure (internet, computer hardware, software) and a data infrastructure (people, training, standards, permissions, workflows, informatics, etc.)
2. Access training, technical assistance or expertise for data collection and making strategic and data-driven decisions.
3. Ensure data-driven decisions are based on high-quality data appropriate for the decision to be made. (High-quality data is accurate, sufficient, collected in a reliable way).
4. Use data to identify factors that influence health, including strengths and assets.
5. Establish metrics and monitor data on public health issues, including root causes.
6. Design and identify metrics that will guide action and measure impact.
7. Share and disseminate findings.

Category B: Ability to collect, access, analyze, and interpret data from a variety of sources including, but not limited to, granular data and data disaggregated by geography (e.g., census tract, zip code), sub-populations, race, ethnicity, and other variables that fully describe the health and well-being of a community and the factors that influence health.

1. Collect, access, analyze, and interpret both quantitative and qualitative data (e.g., feedback from interviews or focus groups) to guide planning and decision-making.
2. Engage community and partners in data collection process, including decisions about what data to collect and methodology for collection.
3. Research and review of existing data sources to inform the need for additional data collection.
4. Analyze data and findings in collaboration with partners, communities, and individuals with lived experience.
5. Validate information, data, analysis, and findings.

Category C: Ability to assess and analyze disparities and inequities in the distribution of disease and social determinants of health, that contribute to higher health risks and poorer health outcomes.

1. Analyze data in collaboration with partners, communities, and individuals with lived experience
2. Engage populations most impacted to make sure data reflects real-world conditions and lived experience. Invite people with lived experiences to share their stories.
3. Communicate data (accurate, tailored for specific audience, with health equity in mind etc.) with community members or community partners.
4. Use data to act and/or drive future work to address inequities.
5. Assess and analyze assets, strengths, and resources for better health outcomes.

Category D: Ability to develop and maintain internal systems and processes for receiving and responding to data requests from the public, policy makers, media, and others.

1. Assure data is available and complies with data standards, statutory requirements, and other legal obligations.
2. Translate data into information and reports that are valid, complete, statistically accurate, and accessible to the intended audiences.
3. Identify the most effective method for sharing data in response to requests and ensure timely dissemination.

Category E: Ability to conduct a collaborative community or statewide health assessment and identify health priorities arising from that assessment, including analysis of root causes of health disparities and inequities.

1. Engage community in all planning aspects of a community health assessment.
2. Examine community involvement and outreach; refine the engagement strategy as needed to enhance effectiveness.
3. Convene public health partners and residents to understand public health issues and the need for prevention activities, and to develop a health assessment.
4. Identify and leverage community strengths and assets as part of the assessment.

Category F: Ability to access 24/7 laboratory and other resources for rapid detection.

1. Access resources for rapid detection, investigation, containment and mitigation of public health problems and environmental public health hazards.
2. Ensure coordination and communication with public and private laboratories.
3. Assure availability of environmental, biological, and chemical laboratory testing, including for maternal and child, chronic disease, and injury issues.
4. (State only) Function as a Laboratory Response Network (LRN) Reference laboratory.

Category G: Ability to participate in or support surveillance systems to rapidly detect emerging health issues and threats.

1. Provide or access epidemiological services
2. Use epidemiological practices to explain the distribution of disease, death, health outcomes, health disparities and systemic inequities.
3. Identify and investigate emerging public health issues
4. Provide surveillance of the population related to emerging health issues and threats
5. Participate in or support syndromic surveillance and other emerging technology and data sets for rapid detection of emerging health issues and threats.

Category H: Ability to work with community partners to collect, report and use public health data.

1. Validate information, data, analysis, and findings
2. Convene and collaborate with partners (cross-sector, cross-agency, and partners working with those affected by health inequities), communities, and individuals, to strategize data usage.
3. Facilitate community-led data processes.

Community Partnership Development

Category A: Ability to create, convene, support, and sustain strategic, non-program specific relationships with partners.

1. Engage key community groups or organizations representing populations experiencing health disparities or inequities; private businesses and health care organizations; relevant federal, Tribal, state, and local government agencies; elected and non-elected officials.
2. Dedicate resources to community partnership development and engagement, and understand how communities are organized
3. Create and maintain organizational policies and practices that advance relationship building and authentic engagement, including ongoing communication with the community.
4. Identify and convene strategic public health partnerships across sectors and governmental agencies, to promote health, prevent disease, and protect community members of the health department's jurisdiction.

Category B: Ability to leverage and engage partnerships and community in to advance health equity

1. Create organizational policies and practices to advance relationship development, authentic engagement, and collective work towards to advance health equity.
2. Identify and implement processes that ensure equity in engagement.
3. Facilitate gatherings that encourage community-driven approaches.

4. Ensure community members, including those most affected by health inequities and those with lived experience, are engaged in bi-directional information sharing.

Category C: Ability to establish trust and engage populations most impacted by inequities in public health decision-making using community-driven approaches.

1. Participate in partnerships, as an invitee.
2. Convene communities at the grassroots level to engage with residents, support bi-directional information sharing, foster leadership opportunities, and facilitate participatory decision-making and action
3. Develop a broad understanding of how communities within the jurisdiction are organized and how community relationships and history may affect the public's health.
4. Establish relationships with communities located within the jurisdiction with the goal of building trust and authentically engaging through community-driven approaches, particularly in historically marginalized and underserved communities and those most impacted by health disparities and underlying inequities.

Category D: Ability to use collaborative processes to develop health improvement plans to address identified priorities.

1. Engage members of the community and multi-sector partners in a community health improvement process and developing plan(s) to improve health outcomes by addressing priorities that are most important to them.
2. Use community health assessment data to establish plan(s) for addressing priorities.
3. Coordinate efforts, resources, and policy agendas across partners to implement the plan(s).
4. Convene public health partners, communities, and individuals to establish a system and metrics for monitoring the community health improvement plan(s) and associated interventions.

Communications

Category A: Ability to develop and implement communications plan to assure routine public health communications.

1. Develop, implement, and maintain systems for communications (communication channels) with public health, cross-sector partners and the public.
2. Include methods to engage communities not reached through traditional public health channels in communication plans.
3. Collaborate with partners, communities, and individuals to co-create communications strategies.
4. Establish metrics and monitor quality of public health communications.
5. Ensure all communications are clear, inclusive, and available in multiple formats to meet diverse needs, including language accessibility, readability/plain language, and accommodations for disabilities.

Category B: Ability to maintain ongoing media relations to ensure information and messages of public health importance are conveyed to the community.

1. Develop, implement, and maintain organizational communication policies (including standard operating procedures, identification of spokesperson, process for responding to media requests, media contact list, etc.) related to media engagement.
2. Develop, implement, and maintain organizational communication templates (i.e. news release template and contact lists) for media engagement.
3. Ensure information and messages of public health importance are shared proactively with the media, including but not limited to, disseminating news releases, conducting news conferences, and using electronic/digital communication tools to interact with the media.
4. Strategically evaluate media coverage and outreach to ensure reach across all communities, leveraging trusted communicators to enhance credibility and engagement.
5. Provide communication training to subject matter experts and leadership.

Category C: Ability to use social media and other platforms to communicate and engage directly with community audiences and members.

1. Assess and identify which social media and other digital platforms (e.g., blogs, podcasts, email newsletters) are available for use.
2. Develop, implement and maintain policies for using social media and other digital platforms. This may include protocol for responding to comments and concerns and responding to feedback (i.e., a social media policy).
3. Build in house capacity to use social media and other digital platforms, including building infrastructure (i.e., IT capabilities and permissions, software, apps) and engaging in training.
4. Assess and determine the most effective social media or other platforms to reach the focus audience, and develop aligned content and messaging based on audience insights, including active listening and engagement.
5. Leverage partnerships to expand reach.
6. Use analytics, and other data sources, to evaluate impact of and engagement with social media and other platform. Implement necessary improvements accordingly.

Category D: Ability to appropriately tailor messages and communications channels for various audiences.

1. Develop, implement, and maintain systems for communications (communication channels) with public health organizations, other cross-sector partners and the public.
2. Provide training and skill development for communicators.
3. Develop relationships with trusted community leaders.
4. Develop culturally and linguistically appropriate content by identifying key audiences, engaging trusted community messengers, and practicing deep listening. Pilot test messaging to ensure content reflects the needs and perspectives of the focus population.

Category E: Ability to develop and implement a risk communications strategy to use during a public health crisis or emergency.

1. Lead and coordinate messaging using Crisis and Emergency Risk Communications (CERC) principles to assure consistency in messaging around critical public information, with intentional focus on communicating with accessible language and cultural humility.
2. Transmit and receive routine communications to and from the public in an appropriate, timely, and accurate manner.
3. Assess and prioritize products, tactics, and channels for public-facing communications
4. Collaborate with partners, communities, and individuals to co-create strategies for risk communication, including strategies for addressing mis- and dis-information.

5. In the event of a public health crisis or event, lead and/or coordinate communication between public health, health organizations, national organizations, federal and state agencies.

Category F: Ability to develop and implement a risk communications strategy to use during a public health crisis or emergency.

1. Design and implement health education and health communication strategies that encourage actions to promote health in culturally and linguistically appropriate ways, including using electronic communication tools.
2. Assess and prioritize products, tactics, and channels for public-facing communications.
3. Engage community members and partners to co-create proactive health education communication strategy.

Equity

Category A: Develop a shared understanding of what creates health including structural and systemic factors that advance equity and racial justice.

1. Cultivate an organizational culture of health equity
2. Develop and support staff to address equity through a systems change approach

Category B: Achieve greater health equity through integration across all foundation public health responsibilities.

3. Create training and conversation to understand equity and systems change
4. Create ongoing space to appreciate how health equity currently shows up in the work of public health, and foster a space to grow
5. Establish and incorporate organizational values, including equity, when determining priorities, decision-making, and setting policies
6. Develop and build staff capacity to address equity

Category C: Work collaboratively to support and foster a shared understanding of the critical importance of equity to achieve community health and well-being.

1. Convene and collaborate with cross-sector and public health partners to identify strategies, initiatives, shared goals, and outcomes
2. Collaborate with partners, communities, individuals, and those working with individuals disproportionately affected by health inequities
3. Collaborate within the organization and across organizational teams to impact health equity
4. Develop and support staff to address equity through multi-sector collaborations

Category D: Work towards health equity and racial justice by strategically addressing social and structural determinants of health (like education, transportation, and safe housing) through policy, programs, and initiatives.

1. Inform and influence the development and adoption of laws and policies that advance health equity
2. Create public health policy that centers equity; includes research, analysis, and costing

Category E: Measure and track progress to assure accountability for equity and racial justice, make improvements, and adapt to changing needs.

1. Develop measures that track community engagement with impacted communities, centering trust, mutual power sharing, and active listening

2. Create ongoing reflection based in data measures for performance progress.

3. Balance quantitative datasets such as census data with qualitative datasets such as information from community meetings, key informant interviews and staff conversations.

Organizational Competencies

Leadership and Governance

Category A: (Ability to) Lead internal and external partners to consensus, with movement to action, and to serve as the face of governmental public health
1. Collaborate with partners, communities, and individuals, including those disproportionately affected by public health issues, to understand the role of governmental public health
2. Convene cross-sector partners to understand the role of non-governmental partners
3. Advocate and communicate about the value and role of public health in the community

Category B: (Ability to) Define a strategic direction for public health initiatives
1. Engage in health policy development, discussion, and adoption with local, state, and national policy makers
2. Convene public health partners to identify strategies or initiatives
3. Develop, implement, and maintain an agency strategic plan with metrics to monitor implementation
4. Track actions taken by the agency in implementing the agency strategic plan to monitor and report on progress
5. Assess how external factors and conditions affect implementation of the agency strategic plan

Category C: (Ability to) Prioritize and implement diversity, equity, and inclusion within governmental public health
1. Assure representation on public health boards and councils is reflective of the community.
2. Internal assessment of policies and practices

Category D: (Ability to) Engage with appropriate governing entities about the department's public health legal authorities
1. Engage with and support the appropriate governing entity about the public health agency's role and legal authority around public health priorities, policies, and laws
2. Promote and assist governing entities in examining, understanding, and modifying public health authorities; educate and support appropriate governing entities
3. Develop, implement, and maintain a governance system and infrastructure for governmental public health, including organizational policies
4. Maintain current operational definitions and statements of public health roles, responsibilities, and authorities

Information Technology Services, incl. Privacy and Security

Category A: (Ability to) Maintain/procure the hardware and software needed to access electronic health information internal to the agency to support operations and analysis of health data

1. Develop, implement, and maintain systems and infrastructure for information technology and electronic information systems within the organization
2. Implement prioritized strategies or initiatives identified to support optimization of technology, information systems, and data

Category B: (Ability to) Support, use, and maintain communication technologies and systems, such as websites and social media, needed to interact with community members

1. Assure continuity of technical operations and connectivity to networks, in an emergency

Category C: (Ability to) Have systems and controls in place to keep any data collected confidential and maintain security of IT systems

1. Develop, maintain, and share internal electronic information systems
2. Develop, implement, and maintain written organizational policies in alignment with data privacy and retention laws
3. Build organizational and individual staff competency around information systems

Workforce Development and Human Resources

Category A: (Ability to) Develop and maintain a workforce representative of the community, with competencies needed to implement the Foundational Public Health Responsibilities effectively

1. Develop, implement, and maintain assets, policies, practices, and a written plan for workforce development
2. Assess and review hiring and contracting policies and practices

Category B: (Ability to) Manage human resource functions including recruitment, retention, and succession planning, training, performance review, and accountability.

1. Cultivate a supportive work environment for staff wellness, which includes employee satisfaction, engagement, and recognition.
2. Develop, implement, and maintain systems and infrastructure for human resource management, recruitment, and employee retention
3. Develop and maintain written training materials on pertinent topics, and provide staff onboarding and ongoing training
4. Develop, implement, and maintain a written succession plan(s) for the organization

Financial Management, Contracts, and Procurement Services, including Facilities and Operations

Category A: (Ability to) Establish a financial management system in compliance with local, state, and federal standards and policies.

1. Develop, implement, and maintain systems and infrastructure for financial management, oversight, and internal auditing of financial operations, which includes budgeting, projections, billing, chart of expense and revenue accounts.
2. Develop, implement, and maintain systems for contracts and procurement

Category B: (Ability to) Secure grants or other funding (governmental and not) and demonstrate compliance with an audit required for the sources of funding utilized.

1. Advocate for, procure, maintain, and manage financial resources for organizational operations
2. Leverage funding and assure resources are allocated to address equity and social determinants of health

Category C: (Ability to) Procure, maintain, and manage safe facilities and efficient operations.

1. Assure maintenance and, as necessary, replacement of long-term or capital assets for organizational operations
2. Manage and operate facilities as safe and physically secure public-facing workplaces
3. Procure, maintain, and manage necessary goods, services, and interchangeable assets

Policy Development and Support

Category A: Ability to advocate for all policies that address environmental, social, and economic conditions that impact health disparities and equity.

1. Understand policies that impact health equity and communicate about policy and legislative activities.
2. Collaborate with partners, communities, and individuals on policies, and ordinances.
3. Collaborate with key partners & policy makers to enact new, evidence-based, legally defensible policies.
4. Convene partners and community to identify policy strategies or initiatives that improve health equity.
5. Organize support for public health statutes, regulations, rules, ordinances, & other policies.
6. Provide education and technical assistance to help people speak up about and understand policies that impact health.

Category B: Ability to develop and maintain public health policies that are evidence-based and grounded in law.

1. Research, analyze, cost out, and articulate the impact of such policies and rules where appropriate, ensuring that community concerns are actively listened to, considered, and integrated into the analysis and decision-making process.
2. Organize support for public health policies, rules and regulations and place them before the entity with the legal authority to adopt them.
3. Assess existing public health policies, identify the need for new policies, and evaluate the impact of their implementation.
4. Engage with appropriate governing entities about the purpose, intent, and outcomes of public health laws, policies, and ordinances.
5. Develop and maintain written organizational policies to support staff in rapidly responding to emerging issues.

Category C: Ability to serve as a primary resource to inform and influence policies by governmental and non-governmental agencies that can improve environmental, social, and economic conditions affecting physical and mental health beyond the immediate scope or authority of governmental public health.

1. Foster and maintain relationships with partners.

2. Convene or participate in discussions with cross-sector partners to identify strategies or initiatives that help non-governmental partners to consider health impacts in all decision-making (Health in All Policies).
3. Share data, information, recommendations, and subject matter expertise to bring a health lens (health in all policies framework) to local decision-making.
4. Collaborate with partners to develop long-term strategies and system changes that improve public health.
5. Monitor the impact of changing state and federal laws on public health to anticipate and articulate the health implications.

Category D: Ability to support compliance and enforce public health regulations and legislation.

1. Participate in state-local collaboration and communication to support and uphold public health regulations.
2. Develop, implement, and maintain written organizational policies supported by statutes, regulations, rules, ordinances, and other policies
3. Educate the community and key partners on the meaning, purpose, and benefits of public health laws
4. Develop and maintain written training materials on public health laws, policies, and ordinances
5. Connect regulated entities to appropriate training, resources, support, and education to reduce risks, increase compliance, and/or take corrective actions.
6. Engage with the appropriate governing entity about the public health agency's role and legal authority around environmental health policy.
7. Conduct, monitor and report public health enforcement activities, including issuing violations and enforcing laws, rules, policies, and procedures related to prevention and control of infectious diseases.
8. Assure the consistent application of public health laws, policies, and ordinances.