Assessing the Continuing Education Needs of Ohio’s Local Boards of Health

In the United States, the public health system thrives through the work of local health departments (LHDs) and health districts. Tasked with controlling the spread of disease, protecting against environmental hazards, preparing for and responding to emergencies, and promoting healthy behaviors, LHDs and districts are an important point of contact for protecting and improving the health of the communities they serve. Boards of health work closely with LHDs and districts as an administrative oversight body. They assist in ensuring LHDs and districts have the resources and capacity they need to respond to the population health needs of the communities they serve.

Ohio Administrative Code 3701-36 sets forth a series of directives to guide the work of LHDs and health districts. Section 3701-36-03 establishes a set of “minimum standards” LHDs and districts need to meet in order to receive state subsidy funds. Included among these standards is a requirement that members of Ohio’s 113 local boards of health complete two hours of continuing education (CE) each year:

“Annual completion of two hours of continuing education by each member of a board of health. Each continuing education credit shall pertain to one or more of the following topics: ethics, public health principles, and a member’s responsibilities. Credits may be earned in these topics at pertinent presentations that may occur during regularly scheduled board meetings throughout the calendar year or at other programs available for continuing education credit.” (Ohio Administrative Code 3701-36-03, 2016).

In an effort to determine the topics Ohio’s board of health members would be interested in learning through CE modules, an online survey was distributed to boards of health members over a one-month timespan (February 2020 to March 2020). The survey was developed and distributed through the Kent State University College of Public Health using the online survey platform, Qualtrics™, and sent to board members via the Ohio Association of Boards of Health (OABH) e-newsletter and the OABH e-mail newsletter.

Potential CE modules were categorized into the 3 topic areas described in OAC 3701-36-03 (ethics, public health principles, and boards of health member responsibilities.) Survey respondents also had the opportunity to share any additional topics they would be interested in learning about through open-ended responses. The survey consisted of 9 questions and participation was completely voluntary. While responses could be kept anonymous, participants did have the option of sharing their name, along with their affiliation. To increase participation, two reminders to complete the survey were sent.

Shortly after the survey was launched, the coronavirus pandemic reached full-speed in the United States, including Ohio. It was determined that given the full participation of local boards of health in the coronavirus response, an additional reminder about completing the survey would not be prudent or elicit additional responses, and the survey was subsequently closed. Survey results are described in the sections below.
Results

Participants

A total of 47 participants completed the survey. Respondents were asked to designate their role (board member or health commissioner), as well as which Ohio Department of Health (ODH) district they represented (Central, Northeast, Northwest, Southeast, and Southwest). There was fairly equal representation of ODH’s five districts among survey respondents, and the majority were boards of health members (83%) (see Figure 1).

Figure 1. Participant Characteristics: Role and District

<table>
<thead>
<tr>
<th>Role</th>
<th>% (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board member</td>
<td>83.0 (39)</td>
</tr>
<tr>
<td>Health commissioner</td>
<td>17.0 (8)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Region</th>
<th>% (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central</td>
<td>21.3 (10)</td>
</tr>
<tr>
<td>Northeast</td>
<td>17.0 (8)</td>
</tr>
<tr>
<td>Northwest</td>
<td>25.5 (12)</td>
</tr>
<tr>
<td>Southeast</td>
<td>23.4 (11)</td>
</tr>
<tr>
<td>Southwest</td>
<td>12.8 (6)</td>
</tr>
</tbody>
</table>

Across ODH districts, the following counties/cities were represented:

Figure 2: Counties/Cities Represented by ODH District

<table>
<thead>
<tr>
<th>Central</th>
</tr>
</thead>
<tbody>
<tr>
<td>Franklin</td>
</tr>
<tr>
<td>Knox</td>
</tr>
<tr>
<td>Pickaway</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Northeast</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cleveland (Cuyahoga)</td>
</tr>
<tr>
<td>Columbiana</td>
</tr>
<tr>
<td>Kent (Portage)</td>
</tr>
<tr>
<td>Lorain</td>
</tr>
<tr>
<td>Mahoning</td>
</tr>
<tr>
<td>Salem (Columbiana)</td>
</tr>
<tr>
<td>Summit</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Northwest</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crawford</td>
</tr>
<tr>
<td>Kenton Hardin</td>
</tr>
<tr>
<td>Mercer</td>
</tr>
<tr>
<td>Paulding</td>
</tr>
<tr>
<td>Putnam</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Southeast</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coshocton</td>
</tr>
<tr>
<td>Monroe</td>
</tr>
<tr>
<td>Morgan</td>
</tr>
<tr>
<td>Ross</td>
</tr>
<tr>
<td>Scioto</td>
</tr>
<tr>
<td>Washington</td>
</tr>
</tbody>
</table>
Interest in Continuing Education Topics

Ethics

In the survey, respondents were asked to select all topic areas pertaining to “Ethics” they were interested in learning more about from the following list: Frequently occurring ethical issues LHDs/health districts; Addressing unethical behavior in LHDs/health districts; Introduction to public health ethics; and Other, with the option to provide an open-ended response (See Figure 3). A total of 39 of the 47 survey respondents (83.0%) reported they were interested in learning about “Frequently occurring ethical issues in LHDs/health districts,” 26 of the 47 survey respondents (55.3%) reported they were interested in learning about “Addressing unethical behavior in LHDs/health districts” (55.3%), and 14 of the 47 respondents reported they were interested in learning in an “Introduction to public health ethics.” 2 of the 47 respondents did not respond, 2 of the 47 selected the “Other” category, and 1 of the 47 respondents shared the following open-ended response “As a professional engineer, this is part of our C.E. requirements so it is a duplicate [to what I am already learning].”

Figure 3. Topic Areas of Interest for Ethics Modules

Please note, the above figures represent responses to a “Select all that apply” question, which allows survey respondents to choose multiple responses to the same question. The above numbers represent the most frequently occurring responses across the four potential topic areas. One individual survey participant’s responses can be included in each of the percentages above, which explains why the percentages total more than 100%.
Public Health Principles

Respondents were asked to select all topic areas pertaining to “Public Health Principles” they were interested in learning more about from the following list: Introduction to Ohio’s sunshine laws; 10 essential services; Introduction to Ohio’s revolving door laws; Social determinants of health/health disparities; HIPPA and the LHD/health district; Health and Equity in All Policies (HEiAP); Interfacing with state public health agencies; and Other, with the option to provide an open-ended response (see Figure 4).

26 of the 47 survey respondents (55.3%) reported they were interested in learning about “Introduction to Ohio’s Sunshine Laws,” 25 of the 47 survey respondents (53.2%) reported they were interested in learning about “10 Essential Services,” 24 of the 47 respondents (51.1%) reported they were interested in learning about “Introduction to Ohio’s Revolving Door Laws,” 24 of the 47 respondents (51.1%) reported they were interested in learning about “Social Determinants of Health/Health Disparities,” 18 of the 47 respondents (38.3%) reported they were interested in learning about “HIPAA and LHDs/health districts,” 17 of the 47 respondents (36.2%) reported they were interested in learning about “Health and Equity in All Policies (HEiAP),” 16 of the 47 respondents (34.0%) reported they were interested in learning about “Interfacing with State Public Health Agencies,” and 1 of the 47 respondents selected the “Other” category and shared: “Foundational Public Health Services, Chief Health Strategist.”

Figure 4. Topic Areas of Interest for Public Health Principles Modules

Please note, the above figures represent responses to a “Select all that apply” question, which allows survey respondents to choose multiple responses to the same question. The above numbers represent the most frequently occurring responses across the four potential topic areas. One individual survey participant’s responses can be included in each of the percentages above, which explains why the percentages total more than 100%.
Board of Health Member Responsibilities

In the survey, respondents were asked to select all topic areas pertaining to “Board of Health Member Responsibilities” they were interested in learning more about from the following list: Performance management; Governance functions; Financial statements/financial management; PHAB Accreditation; General rules for establishing fees; Communications; and Other, with the option to provide an open-ended response (See Figure 5). A total of 30 of the 47 survey respondents (63.8%) reported they were interested in learning about “Performance management,” 26 of the 47 survey respondents (55.3%) reported they were interested in learning about “Governance functions,” 25 of the 47 respondents reported they were interested in learning about “Financial statements/financial management,” 23 of the 47 respondents reported they were interested in learning about “PHAB Accreditation,” 19 of the 47 respondents reported they were interested in learning about “General rules for establishing fees,” 16 of the 47 survey respondents reported they were interested in learning about “Communications,” 1 of the 47 survey respondents did not respond, and 1 of the 47 selected the “Other” category, sharing the following open-ended response: “Little more info on HR.”

Figure 5. Topic Areas of Interest for Board of Health Member Responsibilities Modules

Please note, the above figures represent responses to a “Select all that apply” question, which allows survey respondents to choose multiple responses to the same question. The above numbers represent the most frequently occurring responses across the four potential topic areas. One individual survey participant’s responses can be included in each of the percentages above, which explains why the percentages total more than 100%.

Other Topics of Interest/Additional Points to Share

Participants had the opportunity to share other topics they would be interested in learning about, beyond those outlined in the survey. Potential topics spanned across the 3 categories (ethics,
public health principles, and board member responsibilities), and also included additional topic areas (see Figure 6). A total of 11 respondents shared additional topics of interest:

**Figure 6. Additional Topics of Interest Reported by Survey Respondents**

<table>
<thead>
<tr>
<th>Reported Topics:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Core competencies of public health</td>
</tr>
<tr>
<td>Basic expectations of LHDs. How to survive an ODH audit. RS workforce development/retention. How to manage an aging workforce while attracting young talent.</td>
</tr>
<tr>
<td>Crisis communication. How to deal with difficult people in a public meeting. Security needs at public meetings and facilities</td>
</tr>
<tr>
<td>Isolation and Quarantine - Legal Aspects for Boards of Health; A Robert's Rules of Order Refresher and Training for Board Presidents</td>
</tr>
<tr>
<td>Networking and interfaces with local governments, volunteers and health care delivers</td>
</tr>
<tr>
<td>Board's role in emergency preparedness, quarantine &amp; isolation, Employee benefit requirement in Ohio (PERS, etc)</td>
</tr>
<tr>
<td>Some information regarding HR policies &amp; how they may differ between public &amp; private sector employees.</td>
</tr>
<tr>
<td>State programs available thru Health Depts. Are we taking advantage of all programs locally?</td>
</tr>
<tr>
<td>Fiscal management responsibilities relating to salaries/benefits/services/programs</td>
</tr>
<tr>
<td>I like to learn about anything.</td>
</tr>
<tr>
<td>Networking and interfaces with local governments, volunteers and health care delivers</td>
</tr>
</tbody>
</table>

Finally, participants could conclude the survey with anything additional they would like to share. Two respondents shared the following (see Figure 7):

**Figure 7. Additional Concluding Information to Share**

<table>
<thead>
<tr>
<th>Reported Topics:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Filling professional positions with staff who have proper credentials-alternatives</td>
</tr>
<tr>
<td>I am a former Public Health Nurse for two different health departments, and I currently teach Public Health Nursing at Shawnee State University. I am the only person on our BOH with that background. I would like to see a beginner and advanced track. I would say that many of my fellow board members would need a basic level of education. I would like to participate at an advanced level. It will be a waste of time for me to go through an Introductory program.</td>
</tr>
</tbody>
</table>

**Conclusion and Next Steps**

The purpose of this survey was to assess Ohio board of health members’ interest in a variety of potential CE module topic areas within the following categories: ethics, public health principles, and BOH member responsibilities. This report outlines the top areas of interest, and also provides insight into additional topic areas BOH members would be interested in learning more about. Next steps include the development of 15-minute online modules that BOH members can access at their board meetings to fulfill the State of Ohio’s requirement that all board members complete CE modules each year. The modules will be developed by the Kent State University
College of Public Health, with collaboration and input from the OABH. The first modules are scheduled for completion in June 2020.

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