Supporting Oregon's Local Public Health Workforce

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Intro to CLHO

The Oregon Coalition of Local Health Officials (CLHO) is a 501(c)(6) non-profit organization that represents and supports all 33 local public health authorities (LPHAs) in Oregon through

- Advocacy
- Workforce Development
- Communications



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Context

Funding for local public health is often categorical and inflexible

Public health has been under-funded and deprioritized for years

COVID-19 increased the strain and caused burnout

There are many funding opportunities available (ARPA, Public Health Modernization)

Interest in and awareness of public health work

Workforce Report Click here to read the report



Interviews with local public health administrators from May 2021 – August 2021

MM

30 local public health authorities participated



Baseline of FTE prior to Modernization funding



Collect pay scales for local advocacy

General challenges and strategies for hiring LPHA staff

FTE Findings

- 1905 Total FTE in Oregon local public health
- COVID specific FTEs made up nearly 40% of the local public health workforce
- Oregon has a higher percentage of rural public health workers (22%) than the national average (18%)
- FTE for epidemiologists is limited in rural and small counties
- 12 out of 28 LPHAs that provided FTE data did not have any FTE for epidemiologists

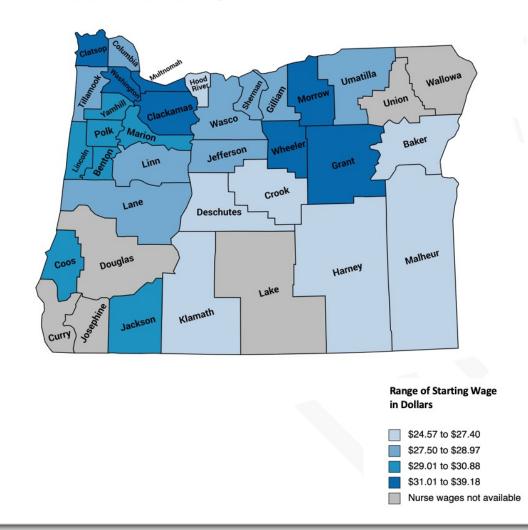
Pay Scale Findings

Range of starting wages: \$24.57/hour to \$39.18/hour

\$29.36/hour is the average starting wage for public health nurses across all counties

Figure 9

Range of starting wages for public health nurses in local public health in Oregon



Counties struggle to have qualified and diverse applicant pools when recruiting for positions.

- Nurses and EHS
- Small applicant pools → even smaller number of candidates from diverse backgrounds
- Biases present in the recruitment process + strict HR procedures



"We need to work on having comparable years of experience and not make them too long - HR is strict about meeting an exact number of years." Jocelyn Warren, Lane County Health Administrator

Counties report pay and benefits as a major barrier to recruiting and retaining staff.

- Cannot compete with local industries
- Benefit packages do not make up for low pay
- Collective Bargaining Agreements
- Compression

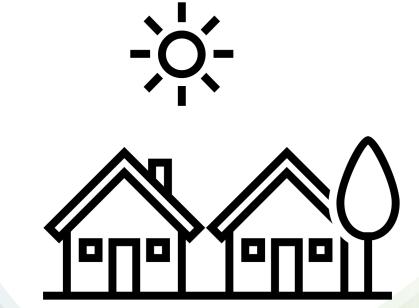
"Nurses can go to the hospital ICU and can make \$100 per hour - when a public health department offers \$27.30 an hour, they think we must have missed a digit." Bob Dannenhoffer, Douglas County Health Administrator/Health Officer

"When new nurses are fresh out of school, they are looking at the student loans and are turning away from public health..." Trish Elliott, Hood River County Health Administrator

Candidates from outside of the area who are selected are often unable to find housing.

- Counties of all sizes in both urban and rural areas experienced this challenge
- Need to "home-grow"

"Even if someone did want a job and wanted to move here, they wouldn't be able to find a place to live." Marlene Putman, Tillamook County Health Administrator



"You may get somebody with a degree in PH, but the on-the ground work is so different, especially doing the community work and relationship-building. It takes a full year to get someone up and running to do their job." Shellie Campbell, North Central Public Health District Director Public Health Administrators described various challenges with the training and preparation public health professionals receive.

Recent grads are unfamiliar with local public health work

Many rural health departments hire people who do not have formal training in public health and must provide time-intensive training

Local health departments do not receive many applications from recent nursing graduates.

Public Health Administrators described some of the challenges in retaining staff.

- There is limited upward mobility, so promising young professionals will leave in order to advance
- Staff must "wear multiple hats" (especially in smaller departments)
- Burnout from the normal demands of the job and the added demands from the COVID-19 response

"Having entry level folks with no room to grow is tough. Folks will come and then not be able to gain the supervisory experience and will leave." Tricia Mortell, retired Washington County Health Administrator "One of our program coordinators works across a variety of programs because no one funding stream will fund one FTE." Jennifer Little, Klamath County Health Administrator

Current Efforts to Support the Local Public Health Workforce

Policy:

- Public Health Modernization funding
- Workforce Incentives Package

Partnerships:

- Public Health Professionals Workforce
 Development Coalition
- Developing training opportunities for local public health staff
- Rural Public Health Workforce Grant

Research:

 The Oregon Center for Nursing → Census of public health nurses

Connect with us!

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Coalition of Local Health Officials