

Partners

The **Public Health National Center for Innovations (PHNCI)**, a division of the Public Health Accreditation Board, identifies, implements, and spreads innovations in public health practice to help meet the health challenges of the 21st century in communities nationwide.

PHNCI acts as a leader to coordinate and align national initiatives and share innovative ideas as communities transform to improve health outcomes.

The **de Beaumont Foundation** creates and invests in bold solutions to build healthier communities. The foundation advances policy, builds partnerships, and strengthens public health to create communities where people can achieve their best possible health.

The **Center for State, Tribal, Local, and Territorial Support (CSTLTS)** at the Centers for Disease Control and Prevention (CDC) is CDC's primary connection to health officials and leaders of state, tribal, local, and territorial public health agencies. CSTLTS plays a vital role in helping health agencies work to enhance their capacity and improve their performance.

Background

Despite complex population health challenges, funding for public health has not kept up with inflation over the past several decades. Further, since 2008, the United States has seen a 15 percent decrease in its governmental public health workforce, which was already operating with minimally sufficient levels of staff. Continued funding and subsequent staff reductions have severely impacted capacity and hindered the ability of our nation's health departments to address community needs and protect and promote health in the communities they serve. Never has this been more evident than during the COVID-19 pandemic.

While several frameworks have outlined the activities and responsibilities of governmental public health departments, none have articulated the number of staff needed to carry out those activities based on the size of the jurisdiction served. This is a critical question for the field to answer to make the case for sufficient staffing to protect the public's health.

Developing Workforce Estimates

Between September 2020 and June 2021, PHNCI and the de Beaumont Foundation engaged public health experts, including representatives from state, local, and Tribal health departments, federal partners; non-governmental partners; and academia, to develop an estimate of needed staffing in governmental public health departments to provide a minimum of public health infrastructure and services. The project concluded:

"The U.S. needs to hire a minimum of 80,000 more full-time equivalent (FTEs) in state and local governmental public health departments -- an increase of 80 percent -- to provide adequate infrastructure and a minimum package of public health services to the nation."

The estimate will support efforts to ensure sufficient funding for the public health system in the United States.

Developing a Workforce Calculator

The development of the national workforce estimates relied on modeling existing expenditure and staffing data for a sample of local and state health departments. The de Beaumont Foundation, PHNCI, and CDC's CSTLTS will build on this work by supporting several activities—including additional data collection, analysis, and modeling—to guide the development of a **public health workforce calculator**. This calculator will allow the health departments to determine the number and type of staff to provide sufficient levels of public health services.

The workforce calculator will be released in Summer 2022.