# NORTHWEST PUBLIC HEALTH & PRIMARY CARE LEADERSHIP INSTITUTE

## Overview and Goals of the Leadership Institute

The Northwest Public Health & Primary Care Leadership Institute focuses on the intersection of public health and primary care, using a health equity focus and an understanding of the life-course perspective to frame leadership development. This program builds on the long-standing training programs of the Northwest Center for Public Health Practice and Northwest Regional Primary Care Association and is designed to help experienced public health and primary care professionals become the next generation of leaders in their fields.

Our vision: Through an immersive experience in the Northwest Public Health & Primary Care Leadership Institute, public health and primary care professionals will be collaborative, adaptable leaders who work effectively with and across fields to improve community health.

## Program Learning Goals

The Northwest Public Health & Primary Care Leadership Institute will:

- Allow scholars the time and the supportive environment to assess their current leadership skill gaps and build competencies in those areas.
- Promote personal growth and self-awareness among scholars through face-to-face and distance learning opportunities guided by practice-based instructors.
- Foster a learning community of public health and primary care professionals focused on building confidence in their ability to collaborate more effectively with their colleagues and communities to address multi-level determinants of community health.

### Leadership Competencies

The Northwest Public Health & Primary Care Leadership Institute will achieve these goals by developing participants' capacity in these four general areas:

- 1. Population Health and Health Equity
- 2. Community Engagement
- 3. Systems Thinking and Health Care Transformation
- 4. Adaptive Leadership

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## Learning Objectives

Within the four general areas listed above, curriculum is designed to meet the following learning objectives, which are regularly reviewed by faculty and subject to changes for each cohort:

### A. Population Health and Health Equity

- 1. Describe historical factors and current conditions that produce health and contribute to disparities in health outcomes between populations.
- 2. Analyze the influence of upstream, midstream, and downstream interventions throughout the human life course.
- 3. Identify significant sources of valid, reliable data to analyze and compare trends in health status at local, state, and national levels.
- 4. Assess the organization for cultural humility and work actively to build culturally relevant policies and practices.
- 5. Identify effective approaches for assessing equity and authentic diversity and inclusion of various groups in the public health and primary care workforce, including at the leadership level.

### **B.** Community Engagement

- 6. Gather information in collaboration with community members for assessing community health needs and developing, implementing, evaluating, and improving policies, programs, and services.
- 7. Use information in collaboration with community members for assessing community health needs and developing, implementing, evaluating, and improving policies, programs, and services.
- 8. Identify relationships that are affecting health in a community (e.g., relationships among hospitals, health departments, community health centers, primary care providers, schools, community-based organizations, and other types of organizations).
- 9. Serve as a supportive convener for communities and stakeholders as they develop strategies, programs, and services that will improve the health and well-being of their communities.

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## Learning Objectives, Continued

#### C. Systems Thinking and Healthcare Transformation

- 10. Describe the interrelationships of factors affecting the health of a community (e.g., inequity, income, education, environment, demographic trends, and legislation).
- 11. Create novel opportunities for individuals and organizations, including non-traditional or unconventional partners, within a community to collaborate to improve health.
- 12. Identify opportunities where public health and health care organizations can partner, such as through accountable care structures and the move to value-based purchasing, to improve the health of populations.
- 13. Apply root cause analysis and health models to identify and visualize the relationship between factors affecting the health of a community.
- 14. Analyze internal and external facilitators and barriers that may affect implementation of population health policies, programs, and services.

#### **D. Adaptive Leadership**

- 15. Apply systematic problem-solving and adaptive skills to identify, analyze, and manage emerging issues, particularly those with ambiguous causes and solutions.
- 16. Implement effective channels and strategies to communicate complex health information with diverse public and professional audiences.
- 17. Demonstrate confidence in challenging the status quo to create paradigm shifts in organizational policy and practice.