Summary
Small Group Discussion
MCH Leadership Competencies Workgroup
MCH Training Program
Joint Meeting
LEND, LEAH, PPC, SPH Grantees
March 4, 2007

Background

Workgroups were established by the MCH Training Program as a strategy to provide training program grantees and affiliated colleagues with an opportunity to:

- Directly impact policies and procedures that guide the MCH Training Program

- Enhance the achievement of the MCH Training Program Strategic goals and objectives

- Assist in the telling of the "MCH Story".

The MCH Leadership Competencies Workgroup[1] was established in Fall 2005, although activities related to a heightened interest in promoting MCH leadership were initiated much earlier. The development of specific MCH Leadership Competencies was a recommendation of the MCH academic and practice communities based on the recognition of the importance of leadership to achievement of MCH goals and the stress placed upon leadership in the MCHB and MCH Training Program Strategic Plans.

The document, *Maternal and Child Health Leadership Competencies*, version 2.0, developed by the MCH Leadership Competencies Workgroup, includes:

- Definition of MCH leadership

- Conceptual framework for the development of MCH leaders

- Description of specific knowledge and skill areas.

Following presentation of an overview of the workgroup process and activities, meeting attendees participated in small groups organized by workgroup and focused on specific questions. Those attending the Leadership Competencies Workgroup session were asked to discuss how they used the draft competencies in the past, how do they envision using them in the future, and what would help them to use them?

---

[1] Groups represented on the workgroup include: MCHB, AMCHP, CityMatCH, AUCD, MCH Training Resource Center, MCH Training Programs (LEAH, LEND, Nutrition, Distance Learning, Pediatric Pulmonary Centers, and Schools of Public Health).

Key Discussion Points

About 25 meeting participants attended the small group discussion focused on the MCH Leadership Competencies and represented a range of MCH Training Program grantees. Each participant had reviewed the document in preparation for the discussion.

- **Trainees come to the MCH Training Programs with a range of range of skills and experiences including those related to leadership.** Trainees come from diverse backgrounds and vary in their training program goals. This requires training programs to inventory or assess the leadership skills and needs of individual trainees. This information can then be used to tailor the approach to leadership and the use of the leadership competencies to the needs of individual trainees. How and when the leadership competencies are used is important as too much, too soon can overwhelm trainees. A key challenge is determining what experiences lead to good leadership practice.

- **Trainees should be introduced early and continuously to the leadership training process.** A focus on leadership can be introduced via the recruitment and orientation processes. Some grantees participating in the discussion reported including information about leadership goals in the letter of acceptance to their program that is signed by trainees. Others introduce leadership and leadership competencies during orientation enabling trainees to understand where the program is going in regard to leadership expectations. This also sets the stage for inter-disciplinary discussions about leadership. It is important to "demystify" the notion of leadership for trainees and help them understand that leadership skills can be applied at the national, State, and community levels. Also discussed was the usefulness of including leadership in as many teaching opportunities as possible and the importance of using the leadership competencies to "name" leadership skills. This approach often raises the trainees' levels of recognition of what leadership is and the role leadership skills play in achieving results.

- **Trainees differ in their leadership "growth curves".** Some trainees are unfamiliar with MCH leadership values and the role of leadership in promoting MCH. Again it is important to understand where trainees are on the leadership continuum and to ascertain their learning needs and training goals. The leadership competencies can be scaled to meet the learning needs of trainees moving from less to more complex skills and supporting them in extending their comfort level in using these skills. Trainees need to understand that leadership is never "done" and view the development and sharpening of leadership skills as an evolutionary process.

- **Assessing trainee leadership growth is challenging but essential.** While the leadership competencies are useful in identifying basic and advances skills and behaviors, it is important to develop strategies to assess and monitor the extent to which trainees are acquiring and using these skills. Participants suggested the use of a Likert scale built around aspects of the leadership competencies which would permit the trainee and training program faculty to assess and monitor progress adjust teaching/learning

experiences accordingly. The question of how to assess leadership activities and outcomes of graduates from the training programs was also raised.

Participants then shared some specific approaches and techniques they have used to promote leadership and the acquisition of leadership competencies by their trainees. These include:

- Stress communication skills as an essential component of leadership development

- Use peer training to promote leadership

- Develop capstone activities that focus on the application of leadership competencies

- Get training out into the community and use community-based organizations, local health departments, etc. as practicum sites for the conduct of leadership projects

- Use stories of aspects of the careers of faculty and other MCH leaders about their leadership experiences.

- Offer leadership coaching to trainees.

- Support trainee involvement in community projects and committee work.

Finally, participants offered suggestions for strategies to support the application of the MCH leadership competencies. These include:

- Share notes of the small group discussions with all grantees via the MCH Training program listserv and website.

- Develop a mechanism to collect and store and assure easy access to promising practices in leadership training and information about the application of the MCH leadership competencies (use the MCH Training Program website).

- Establish a mechanism and process for grantees to report on their leadership training activities and application of the competencies in their progress reports. The development of a template for this reporting would facilitate this process.

- Develop a system to collect and present on the MCH Training Program website leadership resources (materials and tools) designed to promote the use of the MCH leadership competencies.

- Designate time at the March 2008 grantee meeting for updates on progress in using the MCH Leadership Competencies.