

# Doing More, Faster

## How the CDC Foundation Provided Critical Surge Staffing During the COVID-19 Pandemic



**November 2023**

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# Executive Summary

**Do more, faster.** Never in its 28-year history has the CDC Foundation fulfilled that mission more fully than in its response to the COVID-19 crisis. Along with the deadly illness itself, among the urgent issues brought to light by the pandemic was the nation’s decades-long underfunding and understaffing of state, tribal, local and territorial (STLT) public health departments. Responsible for the well-being of entire communities, these vital organizations [soon found themselves overwhelmed by the crisis](#).

The ability to act nimbly and deploy quickly in response to a public-health emergency is built into the DNA of the CDC Foundation, which was established by Congress in 1995 as an independent nonprofit to help extend the lifesaving work of the U.S. Centers for Disease Control and Prevention (CDC) and public health community more generally through the mobilization of resources and forging of public and private partnerships.

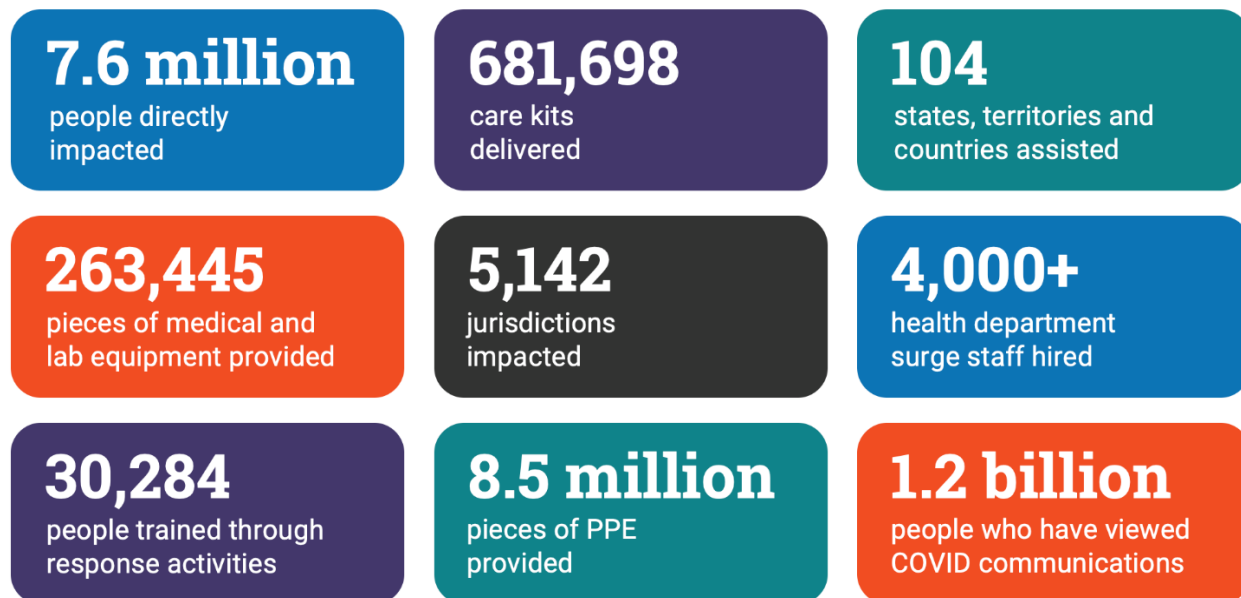
Now, faced with this once-in-a-generation public health emergency, the Foundation was quick to apply when CDC released a funding announcement, requesting help in swiftly mobilizing a COVID-19 public health workforce. The CDC Foundation engaged private donors as well.

The quality and effectiveness of the resulting effort to increase response capacity across the country and alleviate stress on staff in under-resourced health departments led to several workforce-related projects, engaging around 4,200 field employees from 2020–2022. This time-limited approach was meant to provide a bridge to jurisdictions until additional funding became available to hire more staff. As CDC Foundation President and CEO Judy Monroe said in October of 2022 as the workforce projects were winding down, “They have done just that.”

## Purpose

This paper provides a high-level exploration of the CDC Foundation’s response to the urgent need for public health department surge staffing during the COVID-19 pandemic—a challenging hurdle resulting from the most dangerous health threat in more than a century. Starting with a situational background, the paper describes the Foundation’s workforce hiring and staffing projects, how they were created and implemented, and the far-reaching impacts and lessons learned related to those efforts.

This overview of the Foundation’s efforts in quickly building, implementing and sustaining this public health workforce offers a historical perspective on challenges met, a blueprint for surge hiring initiatives going forward and insights into current and future public health workforce needs.



*\*figures represent cumulative project performance from January 2020–April 2023.*

## The Foundation’s COVID-19 Response: First Stages

### Background

Even before the World Health Organization (WHO) officially declared an official pandemic in March 2020, the CDC Foundation was **the first nonprofit in the United States to activate an emergency response for COVID-19**. As part of that effort starting in January 2020, the Foundation brought [in early support from donors](#) to address health equity issues; offer communications guidance; provide care kits with sanitizer and more to first responders and individuals at risk; support initial leading-edge scientific research; provide critical lab equipment and supplies; secure millions of pieces of personal protective equipment (PPE) for communities across the country; and much more.

Still, by April 2, 2020, the United States had confirmed **more than 200,000 COVID-19 cases and 4,076 deaths**. A [Kaiser Family Foundation poll](#) from that date revealed seven in 10 Americans (72 percent) said their lives had been disrupted a lot or some by the coronavirus outbreak, and those numbers would only continue to rise, as would related issues like healthcare accessibility and vaccine hesitancy.

**Public health departments across the country were besieged** after already [losing more than 38,000 employees in the decade prior](#) due to low pay, little advancement opportunity, too-strict hiring requirements and other factors. Now, they were suddenly bombarded by an unprecedented volume of contact tracing cases, case investigations, COVID-19 testing, dissemination of information and more due to the deadly pandemic—while facing a rapidly changing response. Staff burnout was becoming an issue.

Acknowledging the urgency of the situation, the CDC Foundation leadership realized that the organization was in a position to fulfill their “do more, faster” axiom with a project to support these overwhelmed jurisdictions. They had done so before. For instance, in reaction to a rapid increase in opioid deaths in 2019, the Foundation had placed more than 80 surge staff in various jurisdictions to enhance jurisdictional capacity to fight that epidemic.

That effort was possible thanks to a proactive investment in an operational transformation by the Foundation from 2016–2018, supported by its donors. This internal initiative helped to increase functionality for hiring with an enhanced suite of cloud-based and other solutions to track and monitor applicants, manage the overall project and return comprehensive reports. The Foundation also updated its processes in finance, IT and other areas.



*CDC Foundation opioid surge staff filled several key positions at the Rhode Island Department of Health in 2019.*

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## Hiring and Initial Surge

Now the organization was ready to respond to CDC's similar request for an entity that could flexibly meet the hiring demands of health departments nationwide.

The Foundation applied for and was awarded \$45.9 million by CDC to recruit, hire, onboard and manage staff to serve in a variety of roles in health departments across the country, beginning in April 2020. As part of this initial project, the Foundation would quickly:

- **Hire approximately 695 public health workers** to assist with the immediate needs of health departments in all 50 states, tribal organizations, U.S. territories and several major cities as well as core staff to manage the program; and
- Build capacity for community-based organizations to respond to the pandemic.

In addition, the CDC Foundation received separate funding from private sector organizations, including the social media app Tik Tok, which donated \$15 million [for the placement of more than 200 staff](#) in key health departments.

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## Preparation to Launch

Led by CDC Foundation President and Chief Executive Officer Judy Monroe, MD, Chief Operating Officer Monique Patrick and Associate Vice President for the Response Crisis and Preparedness Unit Turquoise Sidibe, the Foundation's team now began the daunting task of operationalizing this effort, with support from the CDC Foundation's upgraded technology and processes.

To provide a sense of purpose and promote a mission of collaboration, the Foundation named their workforce **the COVID-19 Corps**. In addition, the Foundation assembled a solid management structure, including the hiring of a jurisdictional surge team lead, several program managers and regional coordinators (RCs) and recruiting 10 senior advisors (SA), one for each U.S. Health and Human Services-established region.

Engaged remotely, all the senior advisors were steeped in the practice of public health, including leaders who had served as former state and local public health officials, state epidemiologists and senior CDC program officials. Each was [recruited for their depth of experience and relationships](#) with CDC and the jurisdictions themselves. Many came out of retirement to lend their expertise to this emergency effort.

Monica Valdes Lupi, JD, MPH, who'd recently served as the executive director of the Boston Public Health Commission, provided early support and overall leadership for the COVID-19 Corps project. She was then succeeded by Chief Medical Officer Lisa Waddell, MD, MPH, who brought with her similar local, state and national public health experience. Dr. Waddell also facilitated regular leadership meetings between CDC's STLT Response Unit and the CDC Foundation team and ensured the project was meeting all of its goals.

The Foundation also hired additional administrative staff and employed several interns from a variety of top-tier institutions to work on a variety of workforce-related projects.



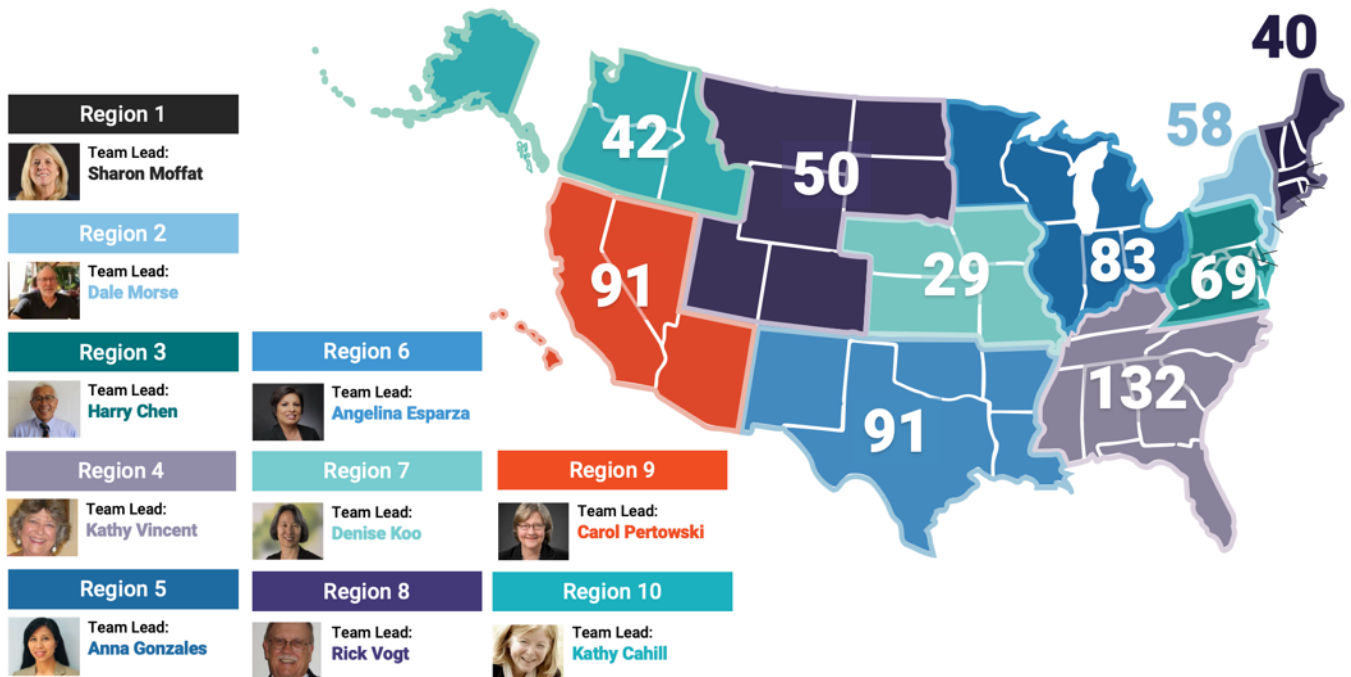
*Among the COVID-19 Corps leaders were (L-R): Senior Advisor Harry Chen, MD and Chief Medical Officer Lisa Waddell, MD, MPH*

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## Identifying Needs

The CDC Foundation developed a hiring strategy that further exemplified the slogan “together our impact is greater.” Patrick recalls, “From the beginning, we built on our experience with the opioid response project and made sure we had a strong working relationship with CDC’s State Tribal Local and Territorial COVID-19 task force.” **The organization quickly began collaborating with both CDC and with individual jurisdictions to identify which positions were most immediately needed and would have the biggest impact.** This close collaboration continued throughout the process, and beyond, establishing important ongoing relationships between CDC, the CDC Foundation and local jurisdictions.

The initial list of jurisdictions included all 50 states, five big cities, 11 tribal nations, and five U.S. territories. Experienced contract recruiters were hired, and small leadership groups (dubbed “pods”) were formed for each region. Regional coordinators partnered with jurisdictions to screen, interview and match candidates.



Above: Senior Advisors with field employees hired by region under initial COVID-19 Corps project (4/1/20-5/31/21) | Source: CDC Foundation

The CDC Foundation’s brand, reputation and relationships supported a robust applicant pool at the April 2020 launch of the effort, including attracting quality candidates in specialized roles like infection preventionists and data scientists. Other traditional career recruitment strategies—including advertisements, partnerships with associations representing health officials, epidemiologists, public health nurses, laboratory specialists and others—were also successful. Important, too, was the public mood at the time, which was centered on an all-hands-on-deck opportunity for concerned citizens who were eager to join the response.

**By December of 2020, the Foundation had hired 773 COVID-19 Corps members to support health departments in 79 jurisdictions.**



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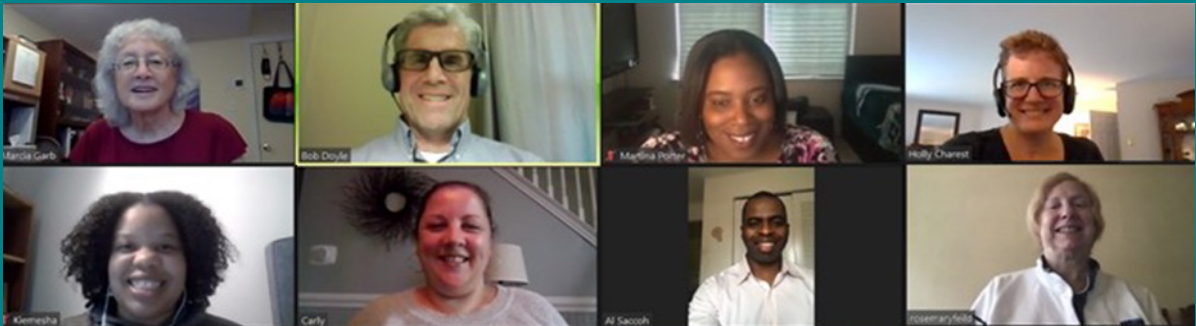
## Contact Tracers Wanted

In this initial phase of the project, contact tracing—reaching out to those who contacted coronavirus to closely track the spread, enable isolation and slow down the frighteningly rapid transmission—was of utmost importance. As a result, the first COVID-19 Corps consisted of two major categories of hires:

- Contact tracing (contact tracers, case investigators, communicable disease investigators, or supervisors or team leads)
- Other public health professionals (epidemiologists, nurses, data analysts, information technology staff, communications specialists and administrative support specialists)

The team managing the CDC Foundation project also continued to work closely with jurisdictions to capture and share information about early successes and emerging threats, including the spread of variants.

## Impact Story:



**They became known as “The Super Tracers.”** The first paid contact tracers hired for the COVID-19 response in Pennsylvania, they encountered challenges that quickly brought them together to develop solutions they could implement and pass along to an appreciative Pennsylvania Department of Health.

[Read the full story.](#)

## Post-Hiring Success and Impact

Foundation field employees began making an impact with their work almost immediately. Field employees assigned to various health departments contributed to a number of critical programs within challenged jurisdictions.

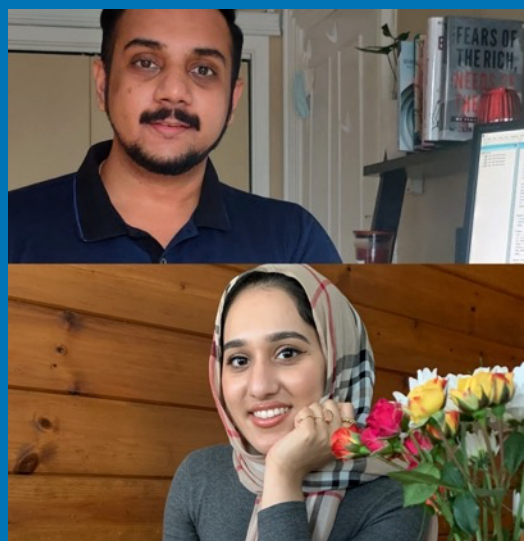
For example, these team members staffed call centers; resolved backlogs of testing and lab results; input necessary data; provided epidemiological and laboratory support for congregate care and infection control; built and maintained data dashboards and other processes; bolstered communications efforts; and even organized a [repatriation effort](#) for American Samoans who became trapped abroad due to COVID travel restrictions.

Staff across the country also **collaborated and contributed to research** surrounding COVID-19 and vaccines, by publishing articles in several CDC Morbidity and Mortality Weekly Reports and participating in CDC and other efficacy studies including [Test to Stay](#), resulting in national media coverage. Epidemiologist Bryan Tegomoh, stationed with the Nebraska Department of Health and Human Services, for instance, helped develop a genomic testing system in the state, which was then utilized to identify one of the nation's [first Omicron outbreaks](#).

### Impact Story:

**Two public health professionals assigned by the CDC Foundation to the Massachusetts Department of Public Health became death-certificate detectives, collecting vital information on COVID-19 deaths as well as race and ethnicity, both key factors in surveilling the path of the disease and ensuring equitable resources went to local communities.**

[Read the full story.](#)



# Meeting Continued COVID Challenges

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## One Year into the COVID Response

By mid-2021, the organization had proven its ability to react quickly and nimbly to the changing circumstances of the pandemic, rapidly adding personnel to areas dealing with hot spots and sharing newly learned best practices.

**In June of 2021, with cases of coronavirus surging and vaccine distribution being scaled up, the CDC Foundation was tasked with two new projects.** Based on the success of the COVID-19 Corps, the first project was aimed at hiring an additional 2,500 public health workers to continue to bridge gaps in state, tribal, local and territorial workforces across the country until other funding sources could be utilized, as well as to build a diverse pool of public health professionals for the future. The Foundation received \$200 million in federal funding for this staffing project, called the Workforce Project.

Another project, funded for \$20 million, recruited and hired 241 immunization staff in 64 jurisdictions across the country to **support vaccine distribution** through state and local health departments.

These two projects together became the **Workforce/Vaccine Initiative**, helping secure staff who were still critically needed in health departments across the country.

## Impact Story:

Lillian Vega, a recent graduate with a degree in social work, was assigned as a contact tracer at the Houston Health Department. She shared: "This work has been incredibly challenging, personally and professionally. I've had some really tough days. It has also been extremely rewarding. I feel like my work here is making a large-scale difference in protecting public health."

[Read the full story.](#)



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## A New Round of Hiring

The candidate pool for the Workforce/Vaccine Initiative was widened to include a broader base of public-health professionals, including policy analysts and attorneys, laboratory project managers to help capture data on variants and develop wastewater surveillance programs, informaticians to support data modernization efforts and more. The effort was led longtime public health professional Kathy Cahill, serving as CDC Foundation vice president for systems integration and a team of equally accomplished program managers and others.

For the latest round of hiring, specialized recruiters were brought on board by the CDC Foundation and a tiered approach was launched, with increased efforts in advertising, social media, networking and sourcing through various channels, including 66 professional associations. Later, enhanced hiring practices including social media ads and campaigns, outreach to universities and recruiting webinars were developed to reach a wide range of candidates in specialized areas like informatics, public health policy, nursing and more.

**Salaries were competitive.** The CDC Foundation team screened approximately 9,800 applications and interviewed approximately 5,800 candidates. As a result, some 3,000 field employees were hired by 2022 under the Workforce/Vaccine Initiative. Staff were assigned to all 50 states, 15 local health departments, four territories and 22 tribal entities. Once again demonstrating the Foundation’s foresight and flexibility and advised by its jurisdictional connections, several specific areas of focus were identified for these field assignees:

### Schools

As the benefits of in-school education became evident and districts began re-opening classrooms, more than 700 field employees were recruited to help establish connections between health departments and K–12 schools, becoming the largest surge staff job category. These liaisons supported students, parents and staff with [contact tracing](#), in-school testing, reporting and information sharing, and aided in [implementing impactful programs](#) like Test to Stay.



**“In my role,** I partner with the DPH to oversee K-12 educational settings with testing and mitigation strategies to support safe and healthy learning environments. During the 2021-2022 school year, we were able to provide testing for nearly 70 school districts and 400+ individual schools.”

—Dawn Seymore

Health Equity Project Manager, Georgia DPH

## Tribal Jurisdictions

CDC Foundation field employees—many tribal members themselves—worked to [strengthen tribal public health infrastructure](#) by supporting testing programs, culturally-appropriate communication vaccination efforts and data collection. Tribal Senior Public Health Advisor Joseph Eltobgi of the Turtle Mountain Band of Chippewa Indians, explained, “We realized that providing data to our tribal leaders was absolutely essential to create the type of change we envision for our people.” In addition, a guide to assist in building tribal public health departments was developed with guidance from an American Indian/Alaska Native advisory board.



*Workforce field employees stationed with the Turtle Mountain Band of Chippewa Indians.*

## Vaccination Efforts

Vaccine demand strategists developed [innovative approaches](#) to address hesitancy and promote uptake among children, adults and families in rural, suburban and urban neighborhoods across the nation. In Ohio, for instance, CDC Foundation field staff managed a project centered around mobile vaccine units, which included all aspects from reviewing and scoring proposals and selecting the vendor to scheduling visits in communities across the state.



*Left: Ohio Department of Health mobile vaccine units traveled to more than 100 sites around the state. Right: CDC Foundation Public Health Nurse Faith Henry with therapy dogs at a vaccine clinic in Maryland.*

## Health Equity

Addressing an ongoing need, [health equity program managers](#) and other related staff were hired in many jurisdictions to address the challenges of social inequities and equal access to care by developing strategic programs and partnerships, assuring inclusive data management, and participating in community outreach and education. In many cases, Foundation field staff were the first to be able to focus on health equity for many jurisdictions that had not yet implemented their plans in this area.

### Impact Story:

**As the pandemic unfolded, societal inequities became glaringly apparent.**

The new funding enabled jurisdictions to add staff to help address these challenges. The CDC Foundation was able to provide 79 employees to work in the public health protection field as health equity project managers and in related positions, providing wide-ranging support to health departments around the country to help community members live their healthiest lives, regardless of race, gender, sexual orientation, disability status and more. And these staffers' personal and career histories were as varied as the programs to which they were assigned. [Read the full story.](#)



Foundation field employees began making an impact with their work almost immediately. Field employees assigned to various health departments contributed to a number of critical programs within challenged jurisdictions.


For example, these team members staffed call centers; resolved backlogs of testing and lab results; input necessary data; provided epidemiological and laboratory support for congregate care and infection control; built and maintained data dashboards and other processes;

bolstered communications efforts; and even organized a [repatriation effort](#) for American Samoans who became trapped abroad due to COVID travel restrictions.

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**Jurisdictions were overwhelmingly pleased** with the Foundation's efforts, reporting that the speed of hiring, access to a pre-screened pool of public-health specialists and the quality of the Foundation's recruits significantly boosted their ability to serve their communities in this crisis. A representative from the Connecticut State Department of Public Health said of the field employees assigned to the department, "They have become integral members of the team. They have become leaders within the program. **They are not an extra set of hands—they are the hands.**"

The initiatives were also highly effective as part of a long-term plan to grow and support a diverse public-health workforce for the future. For more than 55 percent of surge staff, it was their first experience in governmental public health, but **98 percent reported at least some interest in continuing their careers in this field**, with 72 percent saying they were very interested.



**In a review of the program with health departments, 95 percent of jurisdictions expressed the wish to retain their field employees and about 20 percent of surge staff were either hired outright by their jurisdictions or retained through a CDC Foundation contract.**

While it is difficult to track where all hired staff are employed after leaving their roles at the CDC Foundation, it's estimated that approximately **20 percent of the more than 4,000 workers engaged for these efforts were hired by jurisdictions**, either directly or indirectly.

In addition, as new funding becomes available from the federal government and public health continues to rebuild, it's reasonable to predict other staff will benefit from their surge-staff experience and secure positions in public health. Field employees were rightly proud of their work.



**“I am proud** to help reduce health disparities among underserved Latino communities to provide a safer and healthier environment in the school district of Mayaguez. I’m proud to provide a holistic way to positively impact the quality of life of Latino and Afro-Latino communities here in Puerto Rico.”

—Christian Martinez-Rivera

Disease Intervention Specialist, Puerto Rico DOH

## Supporting the Support Staff

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### All Hands on Deck

This rapid expansion of personnel, representing both the program team and the field assignees, was a **massive undertaking on an organizational basis requiring collaboration and commitment from the Foundation’s entire operational staff and support team.** From recruitment and hiring to building/modifying internal support systems, the organization’s departments and services involved in the effort included HR, IT, hardware/software, travel/training, payroll, finance, internal communications and more.

The Foundation’s ability to adjust to changing circumstances and establish a clear management structure for each of their new field employees—including an area coordinator, regional coordinator and program managers as well as a jurisdictional point of contact or site lead—proved valuable. At the beginning of the hiring surge, the team processed and on-



boarded three to four hires a week. That number steadily increased to cap off at around 169 hires per week, requiring a significant investment in human resources and other areas.



**“I am proud** to be a member of a winning team...which played a major role during the outbreak of COVID-19. There is a saying that ‘If I have seen further, it is by standing on the shoulders of the giants.’ The Foundation has played a major role in my life and work area as well. I have learned a lot from my field of work through the CDC Foundation.”

—Stephen Addai

New employees received a CDC Foundation orientation, laptop, software, CDC TRAIN courses and jurisdictional orientation/training. And that was just the beginning. As the nature of the pandemic work continued to evolve, the program team remained dedicated to supporting its field employees, no matter the circumstance, from one-on-one problem solving, to developing guidance and policies and implementing separation procedures and processes for several periods as staff started rolling off the projects.

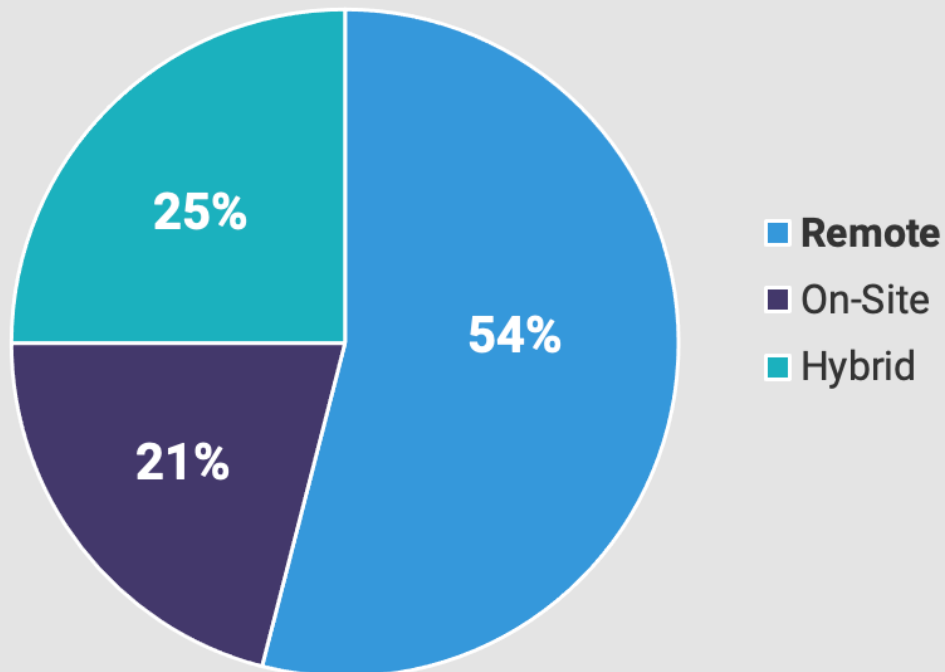
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## Guidance and Motivation

In the initial phase of the COVID-19 Corps, **36 percent of field employees shared that they were new to public health.** Many were just out of college or coming back to the workforce, and a significant number were public-health retirees who returned to the job to be of service during the crisis.

In addition, **most of these new employees, some 54 percent, worked remotely**—also a novel situation for many—so ensuring a system was in place to provide support and guidance was key to motivate and retain this staff and transition them into a long-term workforce for the future.

## Field Employee Worksite Locations



Professional development and personal support opportunities for field employees were valuable to both staff and jurisdictions, especially in the remote work environment. **Peer-to-peer learning communities**, in which employees mutually taught and learned from colleagues via Zoom gatherings, was established to much success, with both formal and informal opportunities to connect, share best practices and group problem-solve across jurisdictions.

Field employees and program staff shared knowledge and experiences on specific topics such as virus variants and contact tracing as well as on professional skills like data software systems and staff management. Group meetings grew wider through all-staff gatherings and others became more focused, with smaller online get-togethers for specific shared job positions, like epidemiologists, health equity program managers and others.

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### Using Communications to Spread the Word

A communications strategy was initiated early in the projects to highlight and promote the impact of the surge staff, as well as to foster a sense of pride and teamwork within the workforce. A dedicated program communications team worked with regional coordinators,

leadership, jurisdictional leadership and others to source stories, videos, blog posts and other forms of messaging related to the activities, experiences and impact of the surge staff—both for external as well as internal communications.

One of the most popular forms of communication and outreach were newly developed and innovative social media salutes to recognize field employees across a wide range of job functions and jurisdictions. **Shared across the Foundation’s social media channels, these salutes were well received internally and externally, resulting in high engagement rates.**

The image displays two side-by-side social media shoutout graphics. Each graphic has a dark purple background with the text 'THE POWER OF PUBLIC HEALTH' in white, bold, sans-serif font. The left graphic features a photo of Jaxon Pridgen, a Laboratory Scientist at the Indiana Department of Health, wearing a white lab coat and gloves. Below the photo is a white bell icon. The right graphic features a photo of Magdalena Dorvil-Joanem, a Senior Epidemiologist at the Tennessee Department of Health, wearing glasses and a grey top. Below her photo is also a white bell icon. Both graphics include the CDC Foundation logo and tagline 'Together our impact is greater' at the bottom left. The Indiana Department of Health logo is on the bottom right of the left graphic, and the Tennessee Department of Health logo is on the bottom right of the right graphic.

*Power of Public Health shoutouts performed very well on social media, likely due to close-up pictures of staff faces. Posts promoting webpages successfully drove users to learn more on our website. Social media posts that showed and/or told stories of staff in-action resonated well with our audiences.*

Additionally, the communications team designed an intranet site expressly for the field employees hired for these efforts to provide increased connection and communication for the widespread staff. **Wellness resources were added** when a [CDC study](#) from April 2021 was released, reporting that more than half of the nation’s total public-health workforce had reported symptoms of at least one mental health condition in the preceding two weeks, including depression, anxiety, PTSD or suicidal ideation.

## Overall Impact

Over a 30-month period during an historic pandemic, the CDC Foundation made a significant impact on the ability of local communities to address the coronavirus crisis and provided fertile ground to grow future workforce efforts:

- **More than 4,200 staff were hired in 91 different jurisdictions to support the COVID-19 response.** The Foundation managed the largest influx of new staff into public health departments in recent history and succeeded in meeting the critical demands of the pandemic as well as furthering the long-term goal of strengthening the future of the public health workforce by introducing a diverse new group into the discipline.



**“My proudest accomplishment while working with the CDC Foundation is finding my passion. Public health has opened my eyes in so many ways. I have found my voice in my career, and I couldn't be happier.”**

—Tracy Moss

- **Strong, flexible partnerships with the jurisdictions and the CDC** were fundamental to the program's success.
- **Short-term staffing can have long-term impact on public health infrastructure**, as evidenced by surge staff work on data analysis/modernization, health equity, tribal public health, communications, case investigation, school support and public health nursing. These workforce-oriented projects not only supported the pandemic response, but also built assets like dashboards, training programs and more that can help health departments and jurisdictions on an ongoing basis.

## Impact Story:

From Alaska to the Great Plains to Puerto Rico, CDC Foundation communications specialists found creative ways to keep their diverse communities—no matter their native language—up to date on the latest health department recommendations. [Read the full story.](#)



- **A nimble and efficient infrastructure was necessary** to recruit, manage and support these field employees and build long-term relationships with jurisdictional personnel around the country.
- **Flexibility to engage remote staff** proved to be an important strategy to secure hard-to-recruit positions, such as IT managers, database developers, policy and legal analysts, refugee coordinators and more.
- **A high level of communications output** showcased CDC Foundation staff impact, highlighting public health careers as well as fostering team pride.

# Lessons Learned

And finally, as with any large-scale endeavor, there were challenges and many lessons learned.

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## Recruiting

Positions that were specialized or located in more remote locations proved to be hard to fill, and jurisdictional needs often changed after job descriptions were finalized and posted.

- To address these challenges, job descriptions should be standardized and written in partnership with human resources (HR) and health departments. If a jurisdiction requires a tailored and unique role, it may require more time and enhanced recruitment support, such as social media posts or outreach to local communities.
- Only 3 percent of employees and entrepreneurs surveyed said they want to work full time at a physical office when workplaces are able to safely reopen after COVID-19, according to a [survey quoted by Forbes](#) in February of 2021. Thus, listing as many positions as possible as remote or hybrid should be considered whenever possible, which should help in filling specialized positions in local jurisdictions.



- Tribal and territorial positions were especially difficult to fill. Consider relocation stipends, local advertising, and longer terms for employment, and be sure that tribal leadership is engaged throughout the recruiting process.

- In addition, the experience of the pandemic showed the importance of job descriptions being broad versus highly specific to allow for flexibility as conditions and needs evolve. For example, as variants developed and vaccines became more accessible, programs requested more technical staff including informatics and IT specialists, health equity staff, laboratory staff, and staff with expertise in survey methods and marketing.
- As the pandemic changed, jurisdictions requested support for schools, health equity and support for more staff to handle other public health emergencies such as mpox and refugee resettlement in selected jurisdictions.
- Policies and procedures governing travel should be flexible, and job descriptions should explicitly detail whether travel is required.
- Appeal to a broad base of local candidates with social messaging emphasizing community, making a difference in public health, supporting health equity, etc.

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## Hiring/Supporting

In addition to the core team, the CDC Foundation expanded its entire operations unit to recruit, onboard, manage, retain and offboard the influx of surge staff. Increased support included HR, admin, recruiting, communications and IT contractors as well as expansion of the organization's compliance and finance offices.

- This project demonstrated a successful way to provide staff during a public health emergency. The ability to provide staff, rather than funding, resulted in rapid filling of positions.
- The approaches used for hiring and recruitment might be useful to jurisdictions looking to fill positions. Two principal factors in successful hiring were the use of remote work and provision of more competitive salaries.
- As the nature of the COVID-19 response work evolved, the CDC Foundation's program team remained dedicated to providing support and adjusted to meet the needs of the field employees. Guidance and policy documents were developed and revised as

needed. Office hours were added for IT, all-staff meetings were held, and an internal website was created and updated often with important documents, stories and the latest information on the Foundation response.



**“I am happy** that all my colleagues and my manager had an open-door policy in which if I needed assistance I could reach out. I am also grateful and proud of what I learned from my team leads and how we managed to work together to accomplish what was necessary for the schools.”

—Daisy Olivo

- Partnerships with jurisdictions were fundamental to the success of the program.
- Though it does require structure and time, peer-to-peer learning is a high-impact strategy to engage, educate and retain staff who work remotely. Bringing small, medium and large groups of employees together by region, interest or job position via an online platform provided an important opportunity to share best practices, problem solve, learn from one another and more experienced colleagues, as well as providing a connection to CDC Foundation teammates.
- In addition to such staff augmentation, it’s important for hiring organizations to assess whether existing operating systems can support a large influx of personnel, and consider enhancements or replacements such as applicant tracking systems, human resources management software (i.e., ADP), built-in evaluation processes, employee support resources, etc.

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## Building a Future Workforce

The organization built a solid foundation of more than 4,000 field employees, but the time-limited assignment produced barriers for those who intend to remain in public health. The work of recruiting diverse candidates who will represent their own communities should continue.



- Placement of field assignees in health departments is a viable strategy for helping jurisdictions respond to public health emergencies. While this project occurred in a pandemic, this strategy can be used on a smaller scale to meet an increased demand for a specific response, and to meet short-term gaps in the public health workforce.
- The Foundation leveraged opportunities to showcase the program and the impact of team members, creating stories, videos, blog posts and other forms of messaging to spotlight the diversity and impact of the surge staff. These assets also fostered team pride and connection and promoted public health as a career.

## Impact Story:

Through rain, snow, sleet, windstorms and even unexpected visits from wildlife, a dedicated trio of COVID-19 Corps healthcare workers are battling the pandemic—and the elements—in their native Alaska to provide COVID testing to the population of Anchorage and beyond. [Read the full story.](#)



- The support for local schools demonstrated the vital role these partnerships can play in advancing public health in communities.
- Peer-to-peer learning included career development events, like “Conversations on Careers” webinars and field employee showcases. These programs provided support to those looking for job opportunities, as did a dedicated careers page on the intranet site. The creation of a more robust alumni network would benefit former team members and foster an ongoing connection with the Foundation, growing its reach and impact.

- The public health workforce needs to be as diverse as the communities they serve to achieve health equity. Opportunities to earn associate degrees or certificates should be expanded, and internships and fellowships offered to create a public health pipeline for the future. States and jurisdictions can be supported with research and technical assistance on planning for workforce needs, salaries and professional development.
- Tribal public health capacity, in particular, needs to be strengthened, while respecting sovereign nation status.



**“Yá’át’ééh [hello],** I am from Lukachukai, Arizona on the Navajo Nation. As CDCF Tribal Public Health Policy Specialist, I am most proud to work with the People of the First Light, the Wampanoag Tribe of Gay Head (Aquinnah), as the COVID-19 pandemic has disproportionately affected many Tribal nations across the country.”

– Dennita Antonello John

- With qualified recruits choosing the private sector, there are many skilled, technical positions at public health departments that are increasingly difficult to fill. Pilot programs should be developed with private sector participants, nongovernmental organizations, educational institutions and public health institutes to develop sustainable staffing mechanisms and competitive compensation.

## Conclusion

The emergence of the most deadly, consequential virus in generations necessitated an unprecedented response. And the CDC Foundation put its slogan, “Together our impact is greater,” into immediate action by teaming with CDC and state, territorial, tribal and local

jurisdictions across the United States to create a rapid, sustained response through the engagement of a newly supported public-health workforce.

For the public health system at large, the surge staffing projects of 2020–2022 bolstered the ability of jurisdictions to tackle the ever-evolving public health crisis, but it also provided an important bridge for jurisdictions to use new funding to support longer-term hires. In addition, these impactful projects introduced a new generation to the rewards of a career in public health, adding to the diversity and representation needed to achieve healthy, robust communities.

Also, from the CDC Foundation’s perspective, the initiatives strengthened the Foundation’s relationship for the future with these local authorities. This experience led to the strengthening of the organization’s own infrastructure, allowing the Foundation to move into the future with confidence and strength to support future needs to rebuild the nation’s public health system.

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