



One Health Division: Looking at Ourselves ~ Linking with Our Communities

On July 24-26, 2001, sixty four Health Division staff participated in a cooperative action workshop dedicated to “Looking at Ourselves ~ Linking with Our Communities.” Participants utilized Future Search, a strategic planning model, to create a shared vision for the future, specifically the role of the State Health Division in 2010, and how the Health Division links with communities.

Together, participants created a shared vision for the future of the Health Division, which consisted of several key elements:

1. Health Division unity;
2. Employee retention and recruitment;
3. Data utilization (data driven decision making);
4. Utilization of technology; and
5. Mobilizing within the Division to empower local communities.

During the future search, participants were continually reminded of the monumental task of “keeping track” of the Health Division’s 450 employees and the numerous programs and regulatory functions provided by those employees. Participants, however, were not intimidated by the need to promote community partnerships, and unity.

The second key element addressed was employee retention and recruitment, both of which have a significant impact on the Division and its ability to fulfill its mission; therefore, plans and activities were developed to promote both.

As the Health Division is challenged to expand services and program outreach without increasing funding, the importance of data collection and utilization is increasing—data illustrates priority public health needs within the state. All agreed that data collection was important, but being able to use the data for program planning and evaluation was critical.

Technological advances have significantly changed the work environment during the past ten years. Keeping abreast of the changes and ensuring staff have appropriate training to incorporate these advancements are directly tied to staff productivity and efficiency.

As more emphasis is placed on service provision at the local level, the Health Division and its programs must determine the capacity and legality for local level service provision. Some services are best suited at the local level; others are most efficiently provided at the regional or state level. Other services, such as regulatory activities, may be best provided at the state level.

Throughout the meeting, staff continually came back to the concept of building and strengthening public health through communication and partnerships. This has become the Health Division’s slogan. The Health Division has subsequently adopted this as the Division’s motto.

Building and strengthening unity through partnerships and communication

As the Health Division plans for the future of public health and its role as a statewide public health agency, unity within the agency is critical. Participants continually voiced the need to increase and improve partnerships and the realization that unity and partnerships cannot be fostered without effective communication. Participants challenged themselves and their fellow co-workers to pursue opportunities to improve communication about their programs and activities, not only within their bureau, but within the Division. Participants also discussed the numerous opportunities that exist for partnership building and collaboration—at the state and local levels. By working together, programs and bureaus can continue to develop a positive image within communities, thus generating positive media coverage-promoting the importance and benefits of public health.

Health Division staff expressed the need to focus internally first, building and strengthening unity within the Health Division. Several potential opportunities for this increased communication were discussed, such as sharing weekly briefing reports with other bureaus, submitting current articles to the Health Division Newsletter, and developing a resource directory identifying which Health Division staff are responsible for which programmatic or regulatory functions. Staff from Health Division Administration committed to exploring the potential of annual, regional staff meetings as one way to improve communication and collaboration.

Establishing partnerships and becoming more familiar with activities at the program level will allow Health Division staff to identify common areas of interest or need, and to share resources when possible. Such partnerships will strengthen the Division, while setting an example for communities. Partnering at the state level may also strengthen relationships with community-based organizations and groups. If the Division can coordinate activities by reducing duplication, those working at the community level will have additional time to assess and address the needs of their community.

Future search participants left the meeting having made a commitment to working together, with all Health Division staff, to realize a vision of what Nevada's public health system should be.

Next Steps: Promoting Health Division Unity

1. Identify existing opportunities to promote communication and collaboration within the Health Division.
2. Develop a resource directory linking staff and programmatic or regulatory responsibilities.
3. Invite all Health Division staff to take an active role in the implementation of the action plan developed during the future search.
4. Utilize the future search as an opportunity for additional strategic planning and fundamental review.

Staff Retention and Recruitment

Challenges related to staff retention and recruitment were identified throughout the future search, starting on Day #1 with the mind map and continuing through the strategic planning process on Day #3. Staff expressed concern and frustration with the length of time involved in recruiting and filling vacant positions, as well as the challenges that come with trying to keep well-qualified staff. People are often motivated to leave state service because of inequities in classification and compensation. The private sector can pay higher salaries and has more flexibility in salary schedules than the state. Additionally, private sector employers attract state employees, many of whom have benefited from the numerous training and educational opportunities offered through state government or the Health Division.

Several groups generated ideas and crafted recommendations for improving retention among current employees. Forming a group to analyze the training needs of staff and the availability of training was proposed as a first step. The group will also consider the changing needs of the Health Division. For instance, as Division staff have more contact with the media and the public, the need for strong communication and public relations knowledge increases.

Other staff volunteered to gather and distribute information on employee wellness and physical fitness. Others suggested occasionally having “healthful” potlucks. Each of these activities contribute to employee wellness and morale.

The work group also has the ability to explore opportunities to partner with training programs and the university and community college system to promote the availability of positions within the Health Division. Some of the partnerships suggested during the future search include the programs at UNR and UNLV that offer public health, health education, and nursing degrees. Participating in community and school-based job fairs is another option for promoting employment opportunities in public health.

Next Steps: Retention and Recruitment

1. Formation of Employee Training and Staff Development Committee, which includes staff from Personnel Services, as well as staff with responsibility for employee training and retention.
2. Conduct a needs assessment of training and employee development needs, as well as the availability of educational and training opportunities.
3. Review the process for requesting training and explore ways to streamline the process.
4. Establish a mechanism for coordinating continuing education courses/units for health professionals employed by the Health Division.
5. Collaborate with training programs and university programs to promote public health professions and publicize available positions.

Development of a Data Team

One of the emerging trends identified during future search was the increasing need for data driven decision-making. In many areas, Nevada's population is increasing at a faster rate than funding; therefore, public health agencies, such as the Health Division, must utilize data to determine the most pressing needs of the residents and visitors of the state.

Additionally, funding sources—both internal and external— are increasing the emphasis placed on accountability. Recipients of grant funds are required to establish, measure, and track progress on outcome and performance measures. How many services are being provided? How well are they being provided? Are they effective?

Equally important is identifying opportunities to collaborate to better meet the needs of the state and to maximize resources, funding resources as well as staff resources. The formation of a data team, with representation from each bureau, will result in the identification of existing data bases, common data elements, areas for improvement in data collection, hardware and software resources and needs, and opportunities for collaboration between bureaus and with community partners.

Data collection and utilization is becoming increasingly important to a multitude of federal, state, and local agencies. Requests for information from the Health Division are increasing; thus, the necessity for a comprehensive policy regarding data sharing and reporting is needed. As the central repository for much of the data collected in the state, it is imperative that the agency have an established system for data collection, analysis, and distribution. The Health Division is committed to maintaining client confidentiality and ensuring standardization of data collection and data integrity. The data team will prepare a policy for data sharing and distribution.

The Data Team has assumed responsibility for developing an integrated data registry over the next ten years. This will maximize resources and improve data analysis by linking databases to generate data which can be used for program planning, funding distribution, and decision-making.

Next Steps: Moving toward an integrated data system

1. Form a Health Division Data Team with representation from each bureau by August 1, 2001.
2. Develop a comprehensive policy related to data collection and distribution; establish an on-going review process by July 1, 2002.
3. Inventory existing data elements within each bureau by November 1, 2001.
4. Analyze hardware utilized by bureaus for data collection by October 1, 2001.
5. Identify training needs - specifically related to data collection, analysis, and utilization - within the Division by January 1, 2002 .

Utilization of Technology

Do all Health Division employees have up-to-date computer software and hardware? Does everyone have access to GroupWise and the Health Division's Intranet? What are the technology-related training needs of employees within the Division? How can the Office of Informatics and Technology ensure it is meeting these needs? How many "techies" are needed to serve the Health Division's 400 plus employees?

In order to fully implement many of the outcomes proposed during the future search, utilization of technology will need to be maximized. Likewise, in order for the Office of Informatics and Technology (OIT) to meet the evolving needs of Health Division staff, a standardized policy is needed—detailing assessment strategies and schedules, provision of technical support, and project management.

As a result of the future search, a four member team will be assembled to develop a comprehensive and standardized policy for the OIT. The team will begin by developing a standardized assessment tool to measure training needs, resources, and software and hardware needs within each bureau. Bureau assessments will be completed within nine months, by May 2002. Then, during the next two years, comprehensive plans will be prepared for each bureau.

The Technology Team will also determine the equipment needs of specific positions within the agency, moving toward standardization of equipment and support for each position category. Standardization will ensure staff have the appropriate technology and training to perform their duties in the most effective way possible.

The Technology Team will also collaborate with the Data Team in the development of a centralized data system within the Health Division.

Next Steps: Utilizing technology to improve public health, partnerships, and communication

1. Create a four-member team, with representation from the Office of Informatics and Technology, by August 1, 2001.
2. Develop a standardized assessment tool to determine training needs.
3. Standardize policies related to the provision of technical support.
4. Assess software needs within the Division.
5. Establish a mechanism for input on improvements related to technology utilization.

Empowering Local Communities

As the state and local communities continue to face the mounting challenge of doing more with less, it becomes increasingly more important to empower local communities to determine their needs and establish programmatic and funding priorities. During the past ten years, Nevada has experienced a tremendous increase in its population. This has resulted in an increased demand for services. At the same time, the state is experiencing health care provider (doctors and nurses) shortages, as well as public health professional shortages. Responding to these increased service demands and decreased staff resources, while striving to provide high quality, comprehensive services, is forcing state and local agencies, service providers, and businesses to re-think the way they do business.

In order for the Health Division to achieve its long term goal of empowering communities to ensure that decision making is made at the local level, the Division must inventory its resources. The Health Division must determine what types of resources (funding, programmatic, training and technical assistance) it can offer to communities to assist with the establishment of local public health priorities. Likewise, the Health Division must identify program deficiencies, so that each bureau and the Division can function cohesively and efficiently in an effort to provide better service within existing constraints, such as the challenge of expanding services without increasing funding.

The assessment of resources can be completed using a matrix, collecting information on: existing coalitions and advisory bodies, contractual agreements, data collection and tracking systems, conference services and training, public information campaigns, funding sources and funding allocation, laws and regulations, and programs and services provided at the local level. The matrix will be developed by an internal working group, with representation from each bureau. Once the matrix is developed, bureaus will complete the matrix. Next, the information will be merged into a comprehensive document, representing the entire Division. The matrix can be used to identify opportunities for collaboration within bureaus and the Division, as well as identify areas needing additional attention. Furthermore, the matrix can be used as a fundamental review tool, illustrating areas of duplication. Existing planning groups or community groups, for instance, can be consolidated or redirected to assist the Health Division in identifying and addressing public health issues.

Following the development of the Health Division matrix, staff will begin a resource assessment of individual communities, identifying stakeholders to involve in the process and communicating the outcomes with the Division and the community. The team from the Health Division responsible for conducting community assessments will want to partner with existing, local coalitions. They will also work with community members and groups to identify assessments which have already been done, utilizing existing information and avoiding duplication. The purpose of the community assessment is to partner with the community to identify strengths and gaps in services. Information collected will be provided to communities to assist them in the establishment of future priorities.

As the matrix evolves, through a continuous evaluation process, it can be expanded to include business/management analysis information. This will enable the Health Division to determine if it is serving the state in the most efficient and effective manner possible.

Although the Health Division wants to empower communities to make decisions at the local level, the Division recognizes the importance of providing services at the most appropriate level. If, for example, direct services can be provided in a more cost effective manner at the local level, then it is appropriate to work toward placing them at the local level. Likewise, programs and services which are more efficiently and effectively provided at the state or regional level should be placed there.

Next Steps: Identifying Resources to Empower Communities

1. Form a team within each bureau to assess resources within each bureau.
2. Form a division team, with representation from each bureau, to complete a matrix illustrating assets and deficits within programs and bureaus.
3. Work together, as an agency, to share resources and fill gaps identified as a result of the assessment.
4. Establish a process for evaluating the information tracked on the matrix and for ensuring the matrix is updated on a continual basis.

Next Steps: Empowering Communities—a long term goal

1. Form a team from the Health Division to assist communities with local assessments.
 2. Identify and partner with community agencies, organizations, and members to develop and conduct the assessment.
 3. Conduct the assessment and prepare an implementation plan based on assessment results.
 4. Empower communities to ensure decision making is made at the local level, to the extent possible.
 5. Collaborate with communities to develop an evaluation process for local needs assessment and empowerment activities.
-

Promoting and Monitoring Implementation: The Role of the Future Search Leadership Team

During the next month, the Future Search Leadership Team will develop a strategy to provide for the continual promotion of this action plan, which resulted from three intense days of strategic planning. The team will also be exploring opportunities to invite continual input into the document. Although common ground has been identified by future search participants, others may have input which should be incorporated.

Additionally, the team will develop a process for tracking and evaluating the Division's progress toward the future—specifically in the areas of Health Division unity, staff retention and recruitment, data collection and utilization, technology, and empowering communities to ensure local-level decision-making.

Building and strengthening public health through communication and partnerships: ~ a commitment to the future

The Health Division and its staff are committed to the future of public health in Nevada - committed to uniting to build and strengthen public health through communication and partnerships. Unity is defined as the state of being one; agreement; harmony. Unity should be achieved by involving every Health Division employee, not just future search participants, in the implementation of the recommendations contained in the action plan. Then, Health Division employees must engage community members—through communication and partnerships—if the ultimate goal of strengthening public health is to be achieved.

Future search does not have an end. Future search is a beginning; it is a catalyst for a continuous process.

One Health Division Looking at Ourselves~ Linking with Our Communities

The goal of future search was to challenge Health Division staff to develop a strategic plan for the provision of public health services in Nevada. Before the strategic plan could be developed, it was necessary for staff to recognize that regardless of the program or bureau an employee is assigned to, we all work for the Health Division, **One Health Division**, and we are all working toward the common goal of ensuring the health, wellness, and safety of our state's residents and visitors. Future search participants, and now all Health Division staff, have been tasked with **Looking at Ourselves**—the way we communicate and collaborate within the Division, as well as they way we communicate, partner, and **Link with Our Communities**. Through this action plan, the Health Division and its staff have made a commitment—internally and externally—to **Building and strengthening public health through communication and partnerships**. Working in tandem we can implement the action plan, demonstrate our commitment and success, and achieve the common goals established to improve the future of public health in Nevada.

Creating a Public Health Agenda

In a few months, a second strategic planning conference will be held in Las Vegas. This conference will also utilize the Future Search methodology and will include between 190 and 240 participants from across the state of Nevada. During the conference, participants will be challenged to develop a shared vision for public health in Nevada, then they will be asked to develop a public health agenda for the state. The results of this meeting will also be formalized into an Action Plan. Both documents, working in conjunction with each other, will guide the Health Division and others dedicated to improving public health in Nevada during the next decade.

Following the development of the public health agenda, both action plans will be merged —strengthen commitment to a unified agenda, within the Health Division and throughout the state.