

Managing Effectively in Today's Public Health Environment

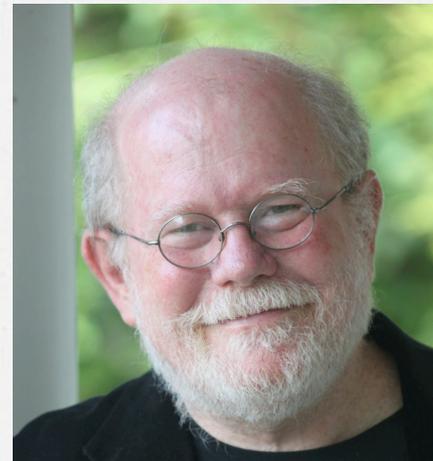
Session 1: Setting the Stage

Acknowledgements

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EXECUTIVE COACH & EXPERT FACILITATOR

 **MIKE MILES, SPHR**
YOUR HUMAN RESOURCE

A close-up photograph of a hand holding a small white rectangular card. The card is held between the thumb and the index and middle fingers. The card has the words "GOOD NEWS!" printed in a bold, red, sans-serif font. The background is a blurred image of a person in a light blue shirt and a striped tie. The entire scene is framed by a white border, and the corners of the white border are held in place by silver pushpins on a textured blue surface.

**GOOD
NEWS!**

COURSE OVERVIEW & REQUIREMENTS



Classroom rules of engagement

- ⦿ Mute phones to eliminate noise
- ⦿ Limit use of competing technology
- ⦿ Share the floor – be respectful
- ⦿ Ask questions at anytime
- ⦿ **Protect confidentiality**
- ⦿ Bring in your own work context and reality
- ⦿ Participate actively

Purpose of the Course

Provide public health professionals with the knowledge, skills, and tools to manage effectively in today's dynamic environment.

- o People
- o Budgets
- o Projects and teams
- o Operations
- o Performance



Overview of Management Course (Key Skills Needed for the Future)

1. Introduction – Setting the Stage and Managing in the “New Normal”
2. Leading Organizational Change and Supporting a Culture of Resilience
3. Managing Budgets and Fiscal Resources
4. Managing Projects and Project Teams
5. Hiring, Managing and Retaining Employees

Whole Course Learning Outcomes

- ① Understand the need/urgency to manage differently in today's complex and dynamic environment
- ② Be able to use new information, tools, and resources to help manage more effectively
- ③ Develop enhanced skills to better manage all aspects of public health organizations

Today's Session 1

SETTING THE STAGE

for Effective Management



Learning Outcomes for this Session

- List 3 trends affecting public health organizations today
- Give 2 examples of implications/consequences of the trends on public health organizations
- Identify 2 skills needed to thrive in the “new normal”
- List one contemporary theory of change
- List 2 ways to support resilience in your organization

Participant assessment

What is your current position?



1. Local or State Health Director
2. Public health nurse
3. City or state health agency/department manager
4. City or state health agency/department worker
5. Health Inspector/Sanitarian
6. Other

How many years has your career been focused on public health?

1. < 1
2. 1 - 3
3. 4 - 8
4. 9 - 20
5. 21 - 40



TRENDS AND IMPLICATIONS
ON PUBLIC HEALTH
ORGANIZATIONS

TRENDS

Public Health 3.0 21st Century Public Health Infrastructure

Karen O'Rourke, MPH

PI, New England Public Health Training Center
at UNE

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Public Health 3.0 Learning Objectives

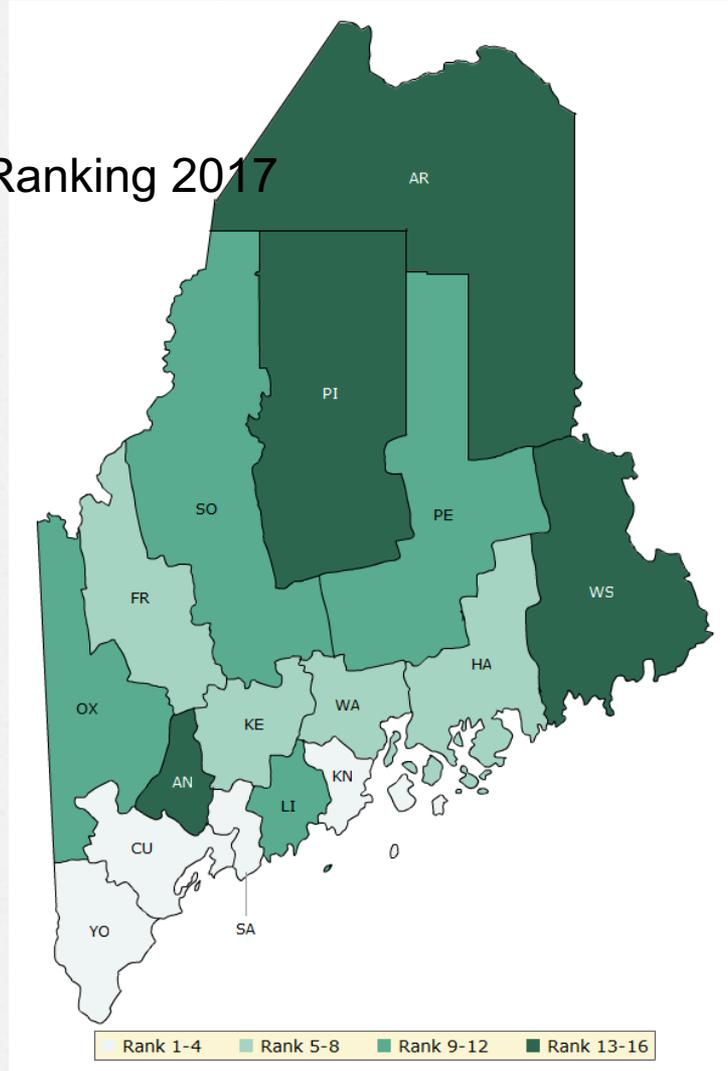
1. Explain the difference between Public Health 1.0, 2.0 and 3.0
2. Describe the factors that led to a call for Public Health 3.0
3. Understand the implications for Public Health managers working in a PH 3.0 environment.

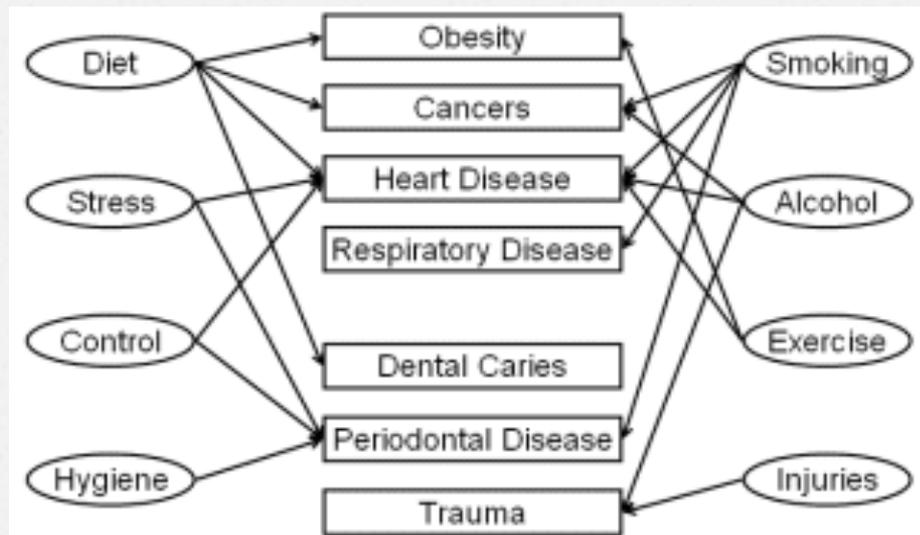
Why We Need Public Health

3.0*

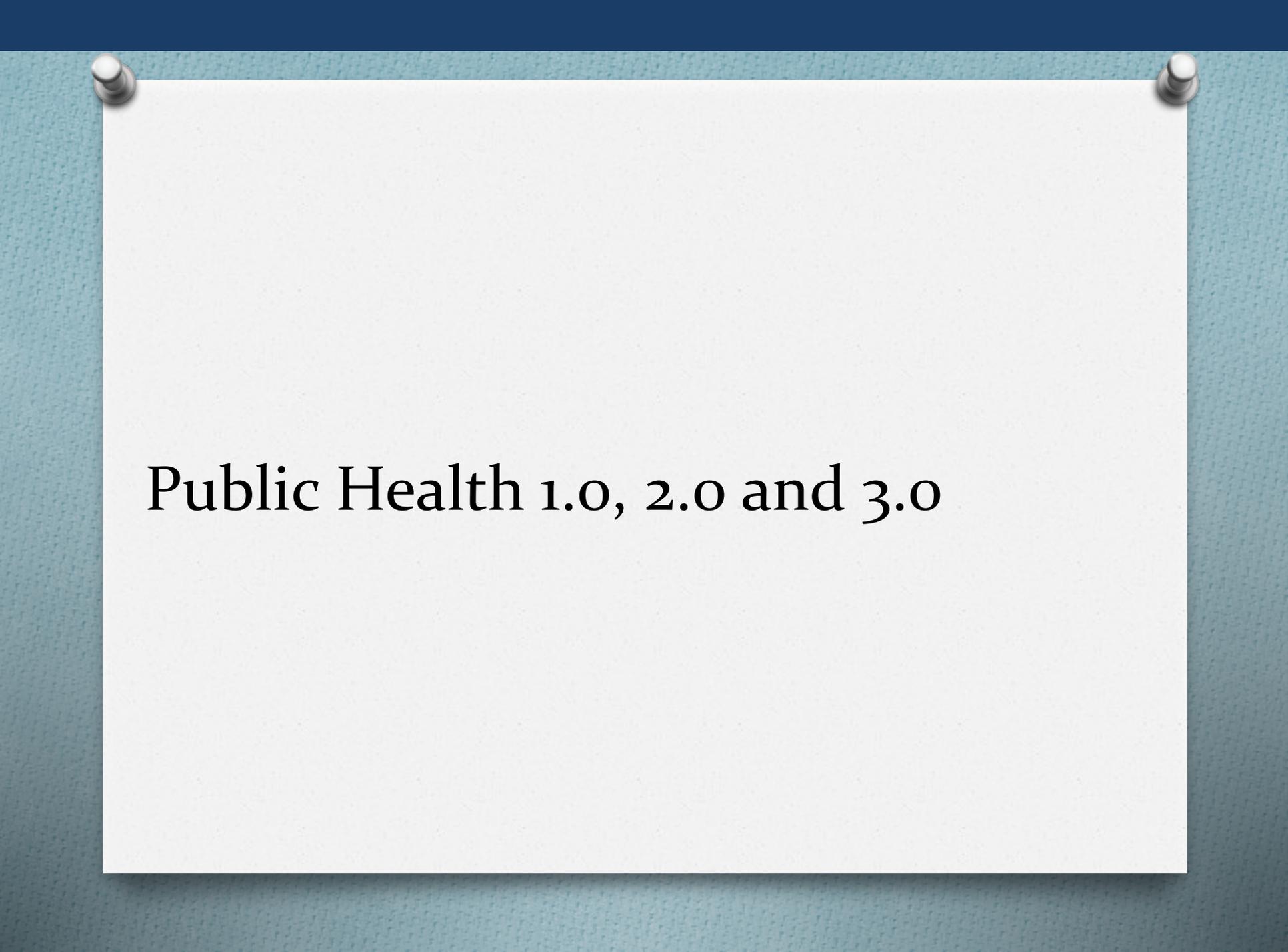
- ZIP codes remain a more accurate determinant of health than our genetic codes
- Public Health has the responsibility improve the health of ALL members of our communities
- Silos result in missed opportunities to leverage critical knowledge of communities

Health Outcomes Ranking 2017





(Sheiham & Watt, 2000)



Public Health 1.0, 2.0 and 3.0

Public Health 1.0

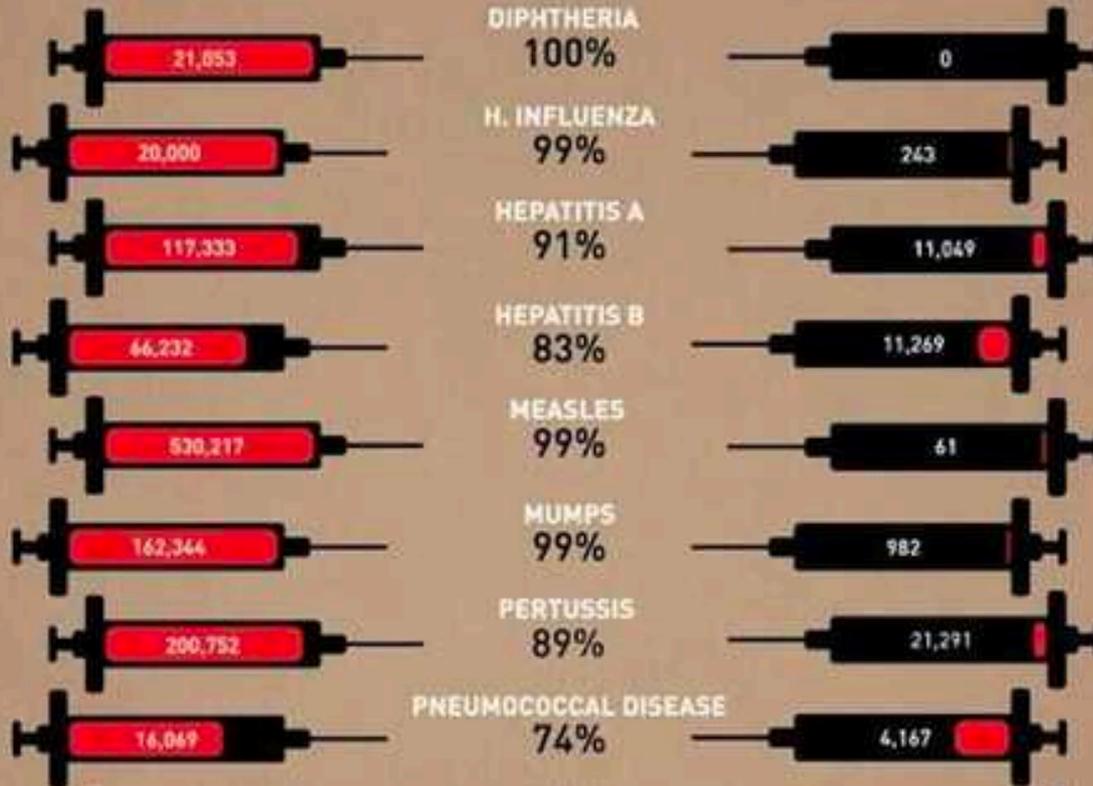
- o Late 19th Century – much of the 20th century
- o Public health became an essential governmental function
- o Systematized sanitation, improved food and water safety, expanded our understanding of diseases, developed powerful new prevention and treatment tools such as vaccines and antibiotics
- o Expanded capability of epidemiology and laboratory science
- o All this led to comprehensive public health prevention

PRE-VACCINE ERA
ESTIMATED ANNUAL
MORBIDITY IN THE U.S.

%

MOST RECENT
REPORTS OF
CASES IN THE U.S.

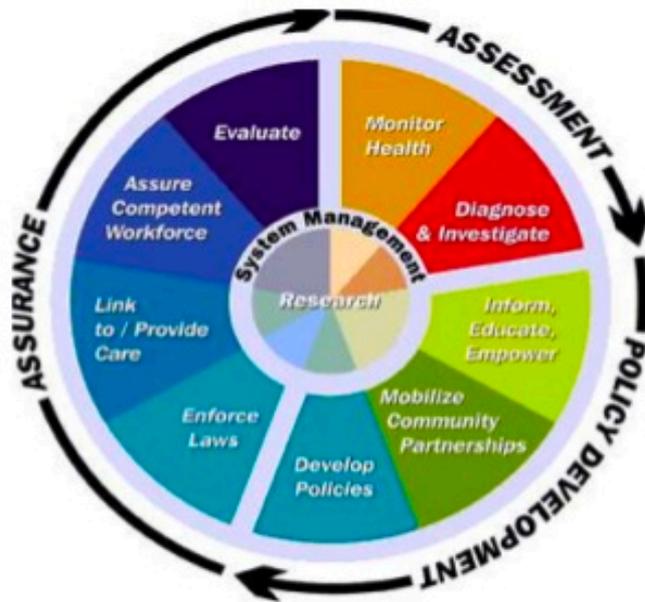
DECREASE



Public Health 2.0

- o Emerged in second half of 20th century
- o Shaped by the 1988 IOM report “The Future of Public Health”
- o Recognized that public health was unprepared to address the rising burden of chronic diseases and new threats such as HIV/AIDs.
- o Led to development of core functions and essential services of public health

10 Essential Services of Public Health



Public Health Functions Project, U.S. Dept. of Health and Human Services

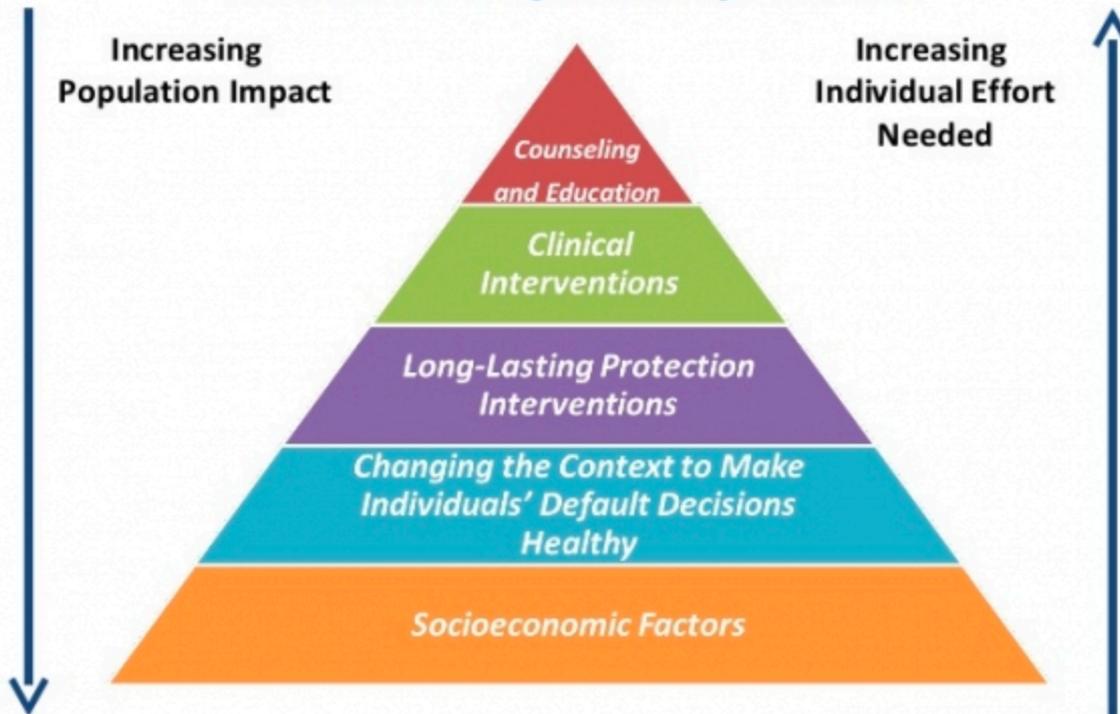
Public Health 3.0

- o In October 2016, the US Dept of HHS Office of the Assistant Secretary for Health released a set of recommendations to achieve Public Health 3.0
- o PH3.0 recommendations seek to shift the responsibilities of public health upstream

PH 3.0 Transforming Public Health

- o Public health faces extreme public health funding challenges, changing population health demands, ACA, mounting data on disparities
- o New model of public health will build on historic success at health improvement by adding **greater attention to the social determinants of health in order to achieve health equity**
- o This will happen through **deliberate collaboration across both health and non-health sectors**

Health Impact Pyramid



Health Equity*

- o “In order to solve the fundamental challenges of population health, we must address the full range of factors that influence a person’s overall health and well-being. From education to safe environments, housing to transportation, economic development to access to healthy foods—the social determinants of health are the conditions in which people are born, live, work, and age.”
- o “Resolving the fundamental challenges of population health will require shifts further upstream to integrate narratives and actions that confront institutionalized racism, sexism, and other systems of oppression that create the inequitable conditions leading to poor health.”



SOCIAL DETERMINANTS FACTORS THAT INFLUENCE YOUR HEALTH

The conditions in which you live, learn, work and age affect your health. Social determinants such as these can influence your lifelong health and well-being.

HOUSING



HEALTHY FOOD

6.5 million children live in low-income neighborhoods that are more than a mile from a supermarket.



LITERACY



INCARCERATION

The incarceration rate in the U.S. grew by more than 220% between 1980 and 2014, though crime rates have fallen.



ENVIRONMENT



ACCESS TO CARE



POVERTY



GRADUATION



HEALTH COVERAGE



More than 89% of U.S. adults had health coverage in 2014. But 33 million Americans still lacked insurance.

The **NATION'S HEALTH**
A PUBLICATION OF THE AMERICAN PUBLIC HEALTH ASSOCIATION

www.thenationshealth.org/sdoh

Strategies to Achieve PH3.0

1. **Public health leaders should embrace the role of Chief Health Strategist for their communities.**
2. **Public Health Departments should engage with community stakeholders—from both the public and private sectors—to form vibrant, structured, cross-sector partnerships.**
3. Public Health Accreditation Board (PHAB) Accreditation for public health departments should be strengthened to ensure that every person in the United States is served by nationally accredited health departments.
4. Timely, reliable, granular-level (i.e., sub-county), and actionable data should be made accessible to communities throughout the country, and clear metrics should be developed to document success in public health practice.
5. Funding for public health must be enhanced and substantially modified.

- School-Based Programs to Increase Physical Activity
- School-Based Violence Prevention
- Safe Routes to School
- Motorcycle Injury Prevention
- Tobacco Control Interventions
- Access to Clean Syringes
- Pricing Strategies for Alcohol Products
- Multi-Component Worksite Obesity Prevention



Changing the Context

Making the healthy choice the easy choice

Counseling and Education

Clinical Interventions

Long Lasting Protective Interventions

- Early Childhood Education
- Clean Diesel Bus Fleets
- Public Transportation System
- Home Improvement Loans and Grants
- Earned Income Tax Credits
- Water Fluoridation



Social Determinants of Health

HI-5



HEALTH **IMPACT** IN 5 YEARS

Public Health Managers in a Public Health 3.0 Environment

- o Draw on leadership from both the public and private sectors that impact community health—
 - o for example, housing, education, and economic development.
- o Empower local leaders to be the chief health strategists in their communities. (That means you!)

1. Public Health Leaders Should Embrace The Role Of Chief Health Strategist For Their Communities.

Chief Health Strategists:

- Can be a public health agency, the elected official, the hospital, major business employer, etc. in the area
- Should work with all relevant partners to address environmental, economic, and social determinants of health
- Must acquire and strengthen their knowledge base, skills, and tools in order to meet the evolving challenges to population health
- Must be skilled at building strategic partnerships

2. Public Health Departments Should Engage With Community Stakeholders—From Both The Public And Private Sectors—To Form Vibrant, Structured, Cross-Sector Partnerships

- o These partnerships should:
 - Share a vision for creating health, equity, and resilience in a community over the long term
 - Include employers and payers among the key partners
 - Organize in order to share governance, set shared vision and goals, blend and braid funding, and capture savings for reinvestment upstream.

- School-Based Programs to Increase Physical Activity
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Counseling and Education

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Social Determinants of Health

HI-5



HEALTH **IMPACT** IN 5 YEARS

Activity – 10 minutes

- o You are pulling your team together to begin action on public health 3.0 by addressing 2 of the HI-5 Initiatives:
 - o Early Childhood Education
 - o Home Improvement Loans and Grant
- o Discussion:
 - o For each initiative who are the partners that you know would need to be part of this initiative? Who will you need to meet?
 - o What would bring them to the table?
 - o What are some potential barriers and/or opportunities to collective action
- o Brief Report Back – great idea; interesting observation; concern; insightful strategy

Acknowledgements

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Break



OR



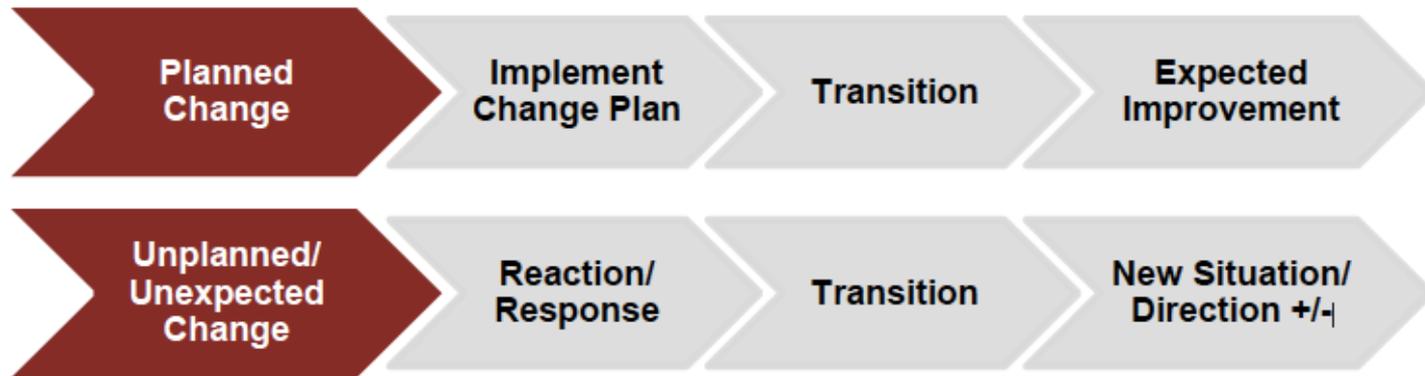
Moving to Public Health 3.0 = Change

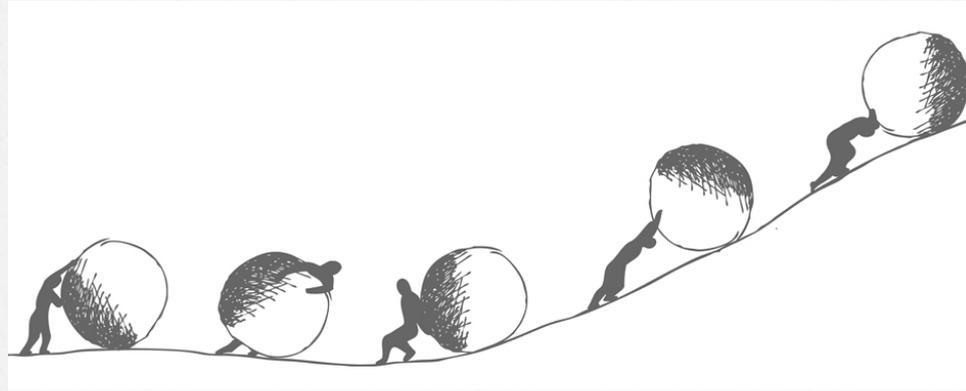


Discussion of Pre-work

Managing Change and Leading Through Transitions

Figure 1: Planned and Unplanned Change With Transition Phase





Where Does Change Management Come In?

What are the recent or upcoming changes in your own environments?

The New Normal

- **Span of Control:**
Today's supervisors may manage 20+ people
- **Reporting Relationships:**
Today's employees often have multiple supervisors
- **Organizational Structure:**
Today's organizations are flatter
- **Individual Strengths:** Inherent strengths of individuals present opportunities



- **Organizational Design**

Today's organizations must be built to change

- **Breadth and Depth of Programs**

Today's organizations are having to do more with less and less simultaneously



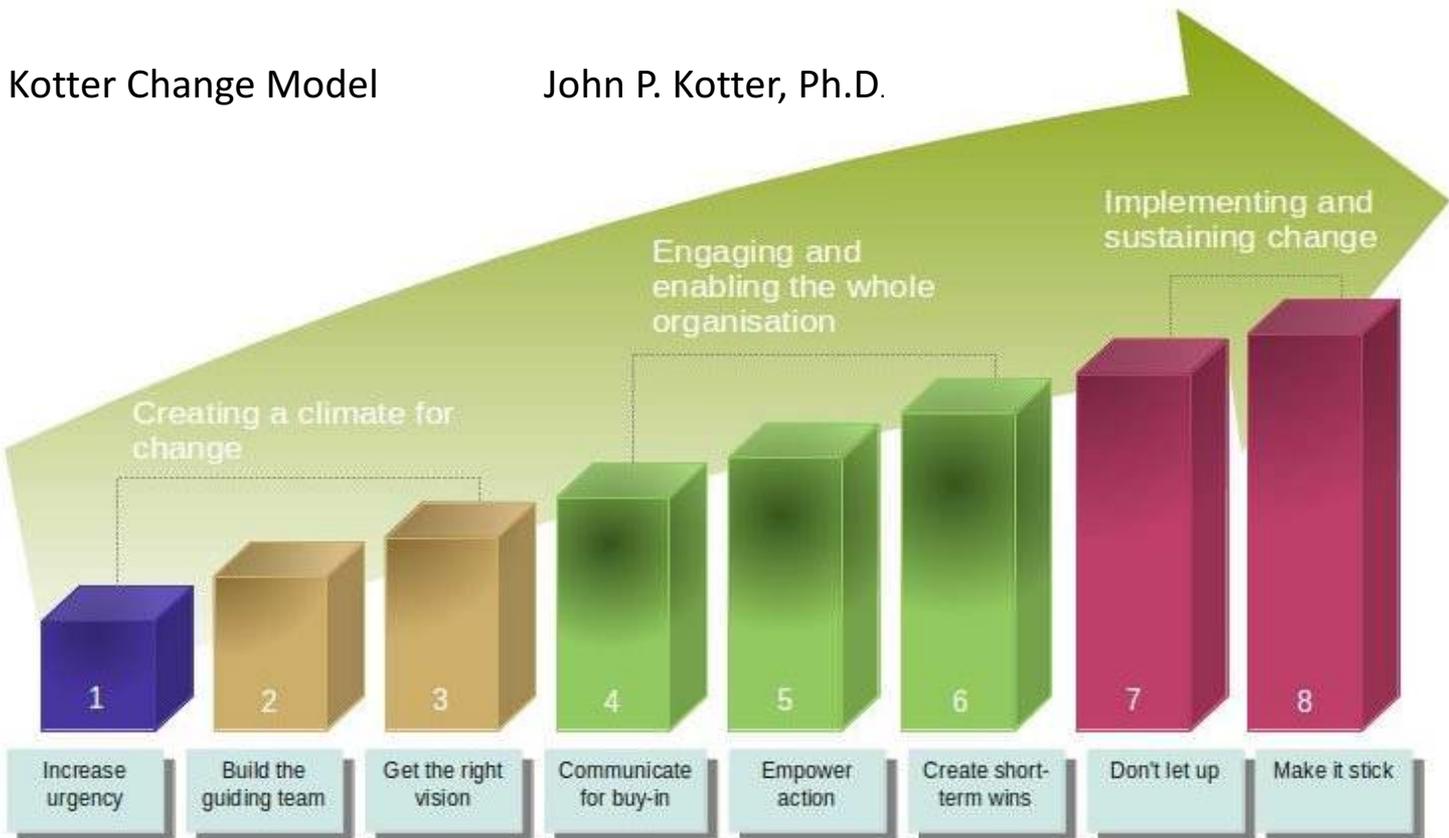
- **Complexity of Issues:** Issues today are more complex and involve many stakeholders.
- **Recruiting and Retaining Top Talent:** As a result of a shrinking labor force, there will be increased competition for top talent.



Kotter – 8 Steps for Change

Kotter Change Model

John P. Kotter, Ph.D.



Tempered Radicals

“People who want to succeed in their organizations yet want to live by their values or identities, even if they are somehow at odds with the dominant culture of their organizations.”

Debra Meyerson



Traits of Tempered Radicals

- Speak their truths, even when afraid
- Have strong support networks
- Take bias toward action, especially “small deviant actions”
- Have clarity about and focus on their most important goals
- Promote experimentation and deep conversations, by example and with their advocacy

Resistance: symptom of an underlying issue

- Fear of the unknown
- A belief that the innovation is not necessary
- Personality conflicts
- The desire to protect oneself from risk or uncertainty
- An assessment or understanding that differs from yours
- Lack of rewards for innovating or accepting change
- Fear of disruption of organizational order or company culture
- Concern about workload or available resources

Exercise

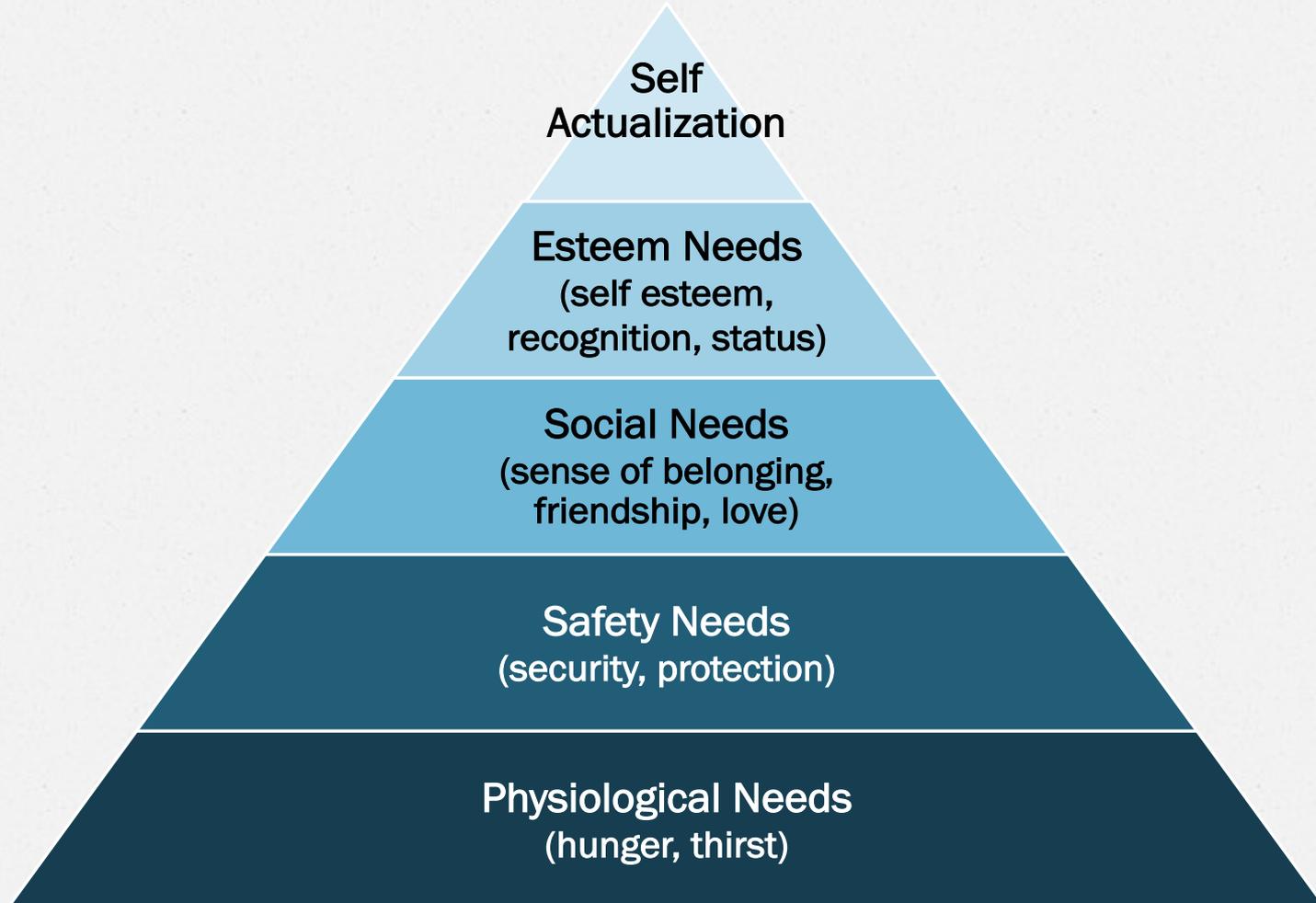
Identify a change that you're implementing and put it through one of these models.

(Regional groupings to answer handout questions)

Employee Motivation and Engagement

Traditional Theories of Motivation

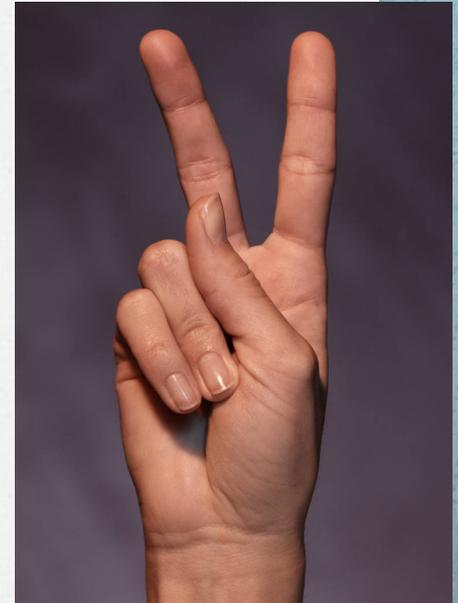
Maslow's Hierarchy of Needs



Traditional Theories of Motivation

Frederick Herzberg – Two-Factor Theory of Motivation

- Motivators/Satisfiers
Direct motivators (responsibility, achievement, interesting work, recognition, promotion)
- Hygiene Factors
Don't necessarily motivate, but can cause dissatisfaction if not present (level of pay, job security, working conditions, quality of supervision)



Employee Motivation and Engagement

Ken Blanchard – Work Passion

Influenced by 8 factors:

1. Meaningful work and proud of contributions
2. Collaborative environment and organizational culture
3. Fairness, respectful treatment, leaders act ethically
4. Autonomy to do work and make decisions

Motivation and Engagement (cont'd)

5. Recognition and rewards for accomplishments and positive relationships
6. Growth, opportunity to learn and develop skills for advancement and career growth
7. Connectedness and trust of their leader
8. Connectedness and trust of their colleagues

LUNCH



Employee Engagement

Four Corners Exercise



What if how
YOU see
things was
recognized?

Resilience as a Workplace Satisfaction Strategy

Enhancing Your Resilience Core
Gail Wagnild, Ph.D.



Five essential characteristics

- Purpose (Meaningful life)
- Perseverance (Get up, again)
- Self-Reliance (Remember?)
- Equanimity (Balance, optimism)
- Authenticity (Coming home to yourself)

Some
successful
resilience
techniques

Deliberate
acts of
kindness

What is the observed
effect on the giver?

Do you see why you should
let others help you?



Mindfulness



Where's the "You" in Your Office?



What makes you smile?

What helps you remember what's important in life?

What else?



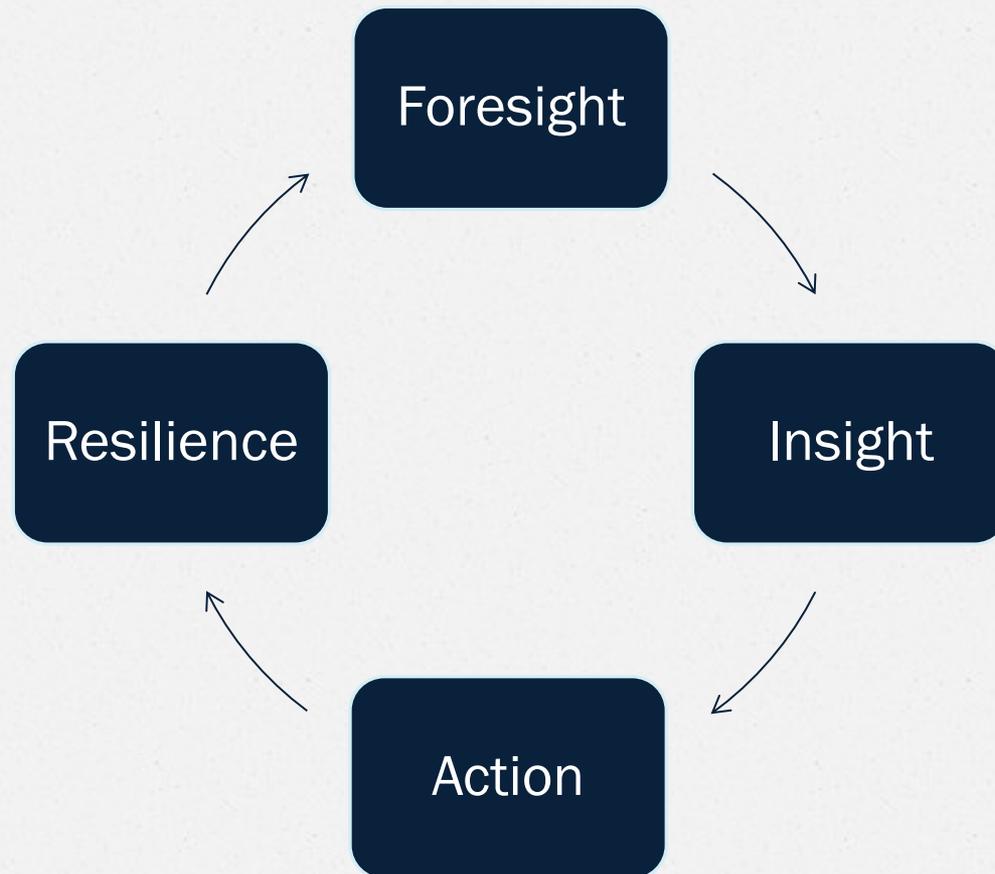
- Meditations

<http://marc.ucla.edu/mpeg/Body-Sound-Meditation.mp3>

CALM app

- Appreciation board
- Three good things in life – the evening gratitude list

Summary: Thriving in the New Normal



Tools for Community Education, Outreach and Collaboration



Jim Douglas

Partnership Director, Health Oxford Hills

Evaluation – Learning Outcomes

- List 3 trends affecting public health organizations today
- Give 2 examples of implications/consequences of the trends on public health organizations
- Identify 2 skills needed to thrive in the “new normal”
- List one contemporary theory of change
- List 2 ways to support resilience in your organization

Post-session “Assignment”

Identify two take-away lessons from this session.

Describe what you will do differently (better, more of, less of) to implement your ideas, ultimately enhancing your management effectiveness.

Next Management Course Session

Session 2: Budget and Financial
Management

October 4, 2017, 12-1 p.m., Webinar

Upcoming Course Schedule

Budget and Financial Management - Part A
(October 4, 2017, 12-1:00) Webinar

Budget, Financial and Project Management – Part B
(October 13, 2017, 9-3) In Person

Recruiting and Hiring: Getting the Right People for your
Team (October 25, 2017, 12-1) Webinar

Coaching, Developing and Managing Performance
(November 13, 2017, 12-1:30) Webinar

Conflict Management and Collaboration
(December 1, 2017, 9-3) In Person

Pre-work for Next Session

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Thanks for attending!

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