INVESTING IN EQUITABLE PATHWAYS TO PUBLIC HEALTH EMPLOYEE DEVELOPMENT

Ingham County Health Department, Michigan



ABOUT US



Aaron Watts, DBA

- ICHD Workforce Development Coordinator since October 2022
- Joined ICHD in March 2021
- DBA, MA, BSc, licensed Paramedic Instructor/Coordinator and certified Michigan Professional Emergency Manager
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Anne Barna, MA

- ICHD Deputy Health Officer Administration
- Joined ICHD in 2022 after 17 years at Barry-Eaton DHD
- Doctor of Public Health Student at University of Illinois-Chicago
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PRESENTATION OBJECTIVES

- Discuss what is public health workforce development and why is it needed
- Identify and explore theories of change
- Discuss internal assessments and their applications
- Discuss relevant findings from ICHD 2022 and 2023 internal assessments
- Identify methods for developing workforce development initiatives
- Discuss examples of ICHD 2022 and 2023 equitable workforce development initiatives

ABOUT ICHD

- Ingham County (Lansing/East Lansing)
- Serving ~285,000 county residents
- Urban/suburban/rural
- 3 main branches
- ~350 employees





ICHD WORKFORCE DEVELOPMENT COMMITTEE

- Created in 2017 to meet initial PHAB accreditation requirements, dissolved in 2019
- Revived in August of 2022 to address critical components of workforce and organizational needs
- 23 current members across organization
- Led by Workforce Development Coordinator with oversight from Deputy Health Officer of Administration

COMMITTEE GOALS & PRIORITY WORK AREAS

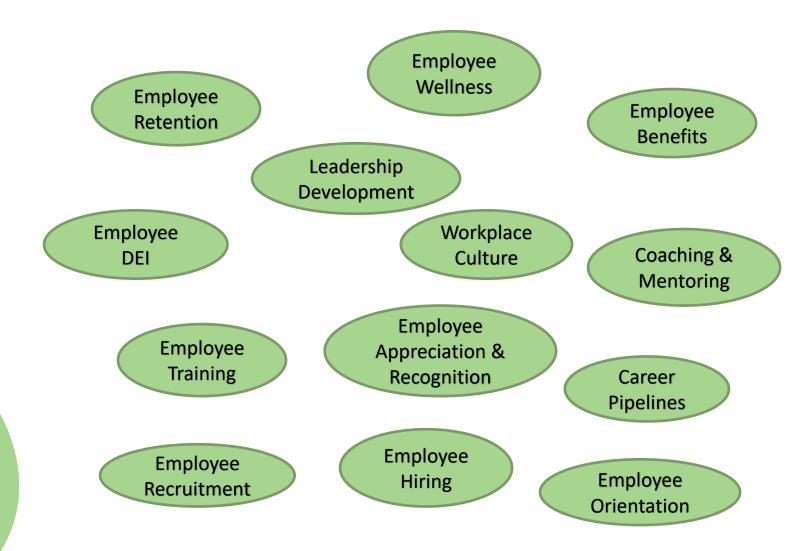
- Assess root causes and factors contributing to barriers in obtaining and sustaining a skilled, resilient public health workforce at ICHD
- Develop and implement internal projects to reduce those identified barriers
- 2022-23 priority areas:
 - Workplace culture
 - Leadership development
 - Workforce retention
 - Training
 - Orientation and onboarding
 - Mentorship
 - Recruitment and hiring
 - Volunteers and internships
 - Academic health department initiatives



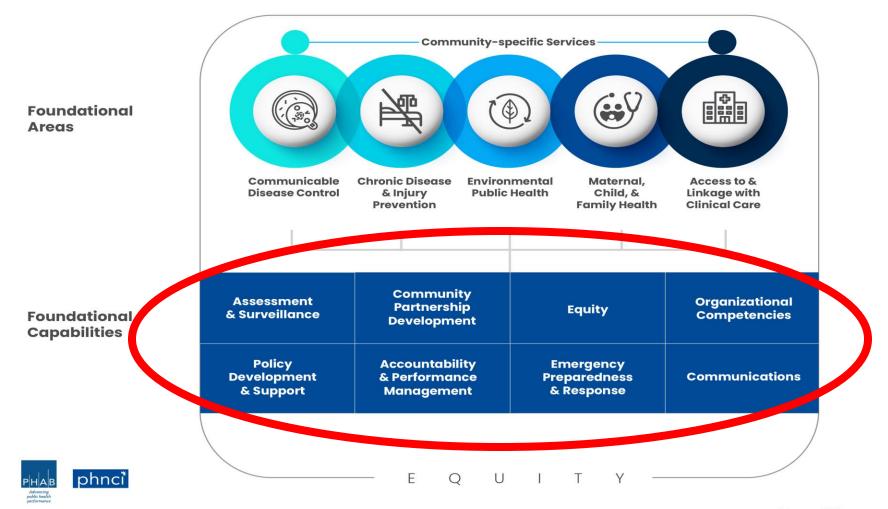
WHY DO WE NEED WORKFORCE DEVELOPMENT?

- Investment in the public health workforce
- The Great Recession
- The Great Resignation
- Younger generations entering the workforce
- COVID-19 pandemic

SO WHAT IS WORKFORCE DEVELOPMENT?



Foundational Public Health Services



What is Adaptive Leadership?

- Harvard University's Ronald Heifetz, who developed the thinking, suggest that there are two radically different kinds of problems.
- Those that require the application of existing knowledge (technical challenge) and those that require experimentation, <u>innovation</u> and adaptation (adaptive challenge).
- British academic <u>Keith Grint</u> describes these sorts of problems as
 "Wicked Problems" where there is no certainty about the right
 thing to do and no agreement that any solution will have a positive
 impact. Tackling them can only be done through
 creative <u>collaboration</u>.
- Tame solutions do not solve wicked problems. Equally, for Heifetz, you cannot use technical know-how to resolve adaptive challenges. If you do, you will fail.

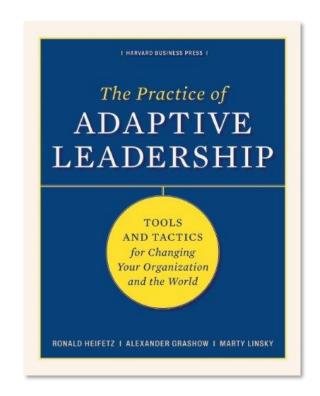
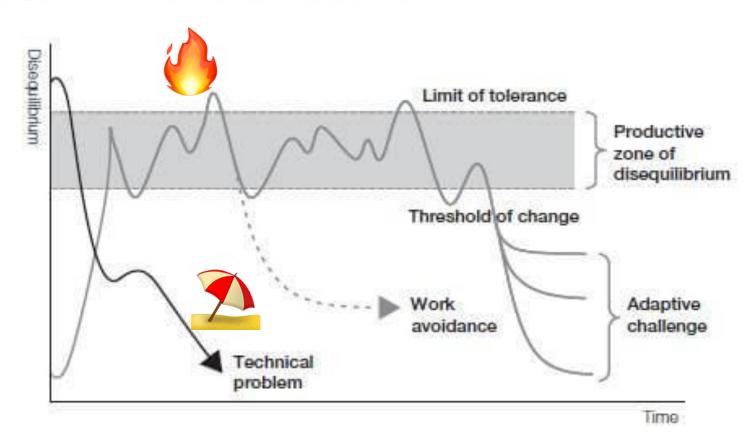




FIGURE 2-4

The productive zone of disequilibrium



Source: Adapted from Ronald A. Heifetz and Donald L. Laurie, "Mobilizing Adaptive Work: Beyond Visionary Leadership," in *The Leader's Change Handbook*, eds. Jay A. Conger, Gretchen M. Spreitzer, and Edward E. Lawler III (San Francisco: Jossey-Bass, 1998).



How do we address 'Below the Iceberg' Wicked Challenges?

Problem	Solution	Example	Type of Learning	Public Health Leadership Role
Technical: Simple	Clear	Fixing a broken ankle	New knowledge is required	Expert leader solves the problem
Technical: Complicated	Unclear but becomes clear	Budget cuts	New skills are required	Expert diagnosis: The leader helps group problem-solve
Complex: Wicked, Systems	Unclear and changes; no one solution	Climate change	New behaviors and on-going learning is required	Multiple leaders help group problem-solve

Transformational Change & Leadership

Act 1: Realizing the need for change

- A transformational leader perceives and responds to the need for change that are environmental/external to the organization.
- Explore ways to help individuals acknowledge the old ways of doing things.

Act 2: Creating a New Vision

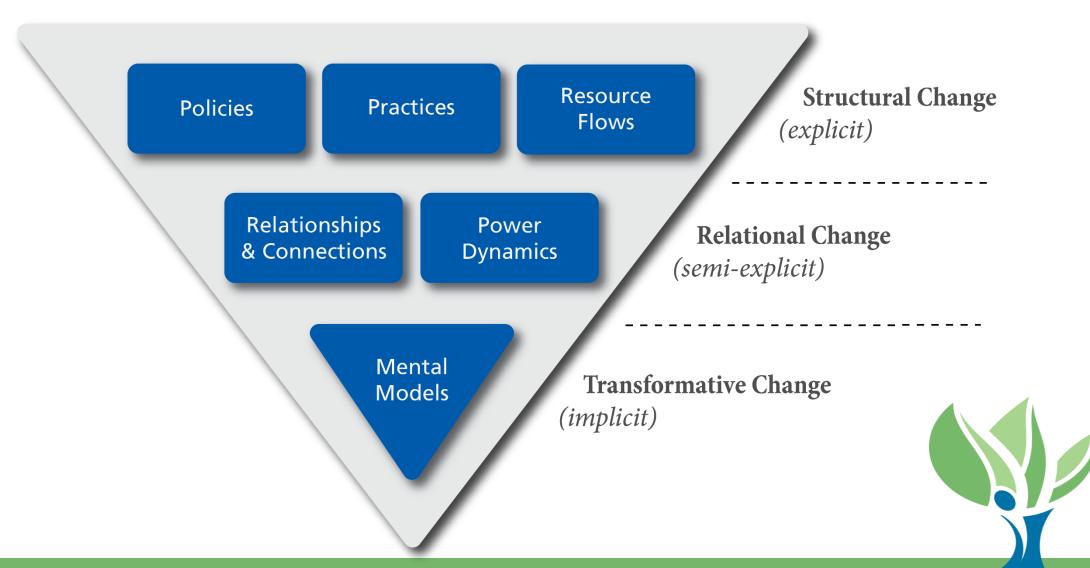
- Creating a vision and mobilizing commitment from a critical mass of the employees/partners
- This requires the vision to be compelling enough to motivate the team toward a new way and be willing to 'let go' of the old approaches and ways. This is a neutral zone. Individuals must be motivated to adopted the new way and have opportunities to practice and receive rewards.

Act 3: Institutionalizing the work

- New behavior, actions and practices are realized. New thinking is applied and practiced.
- Individuals celebrate wins; continued practice, learning and growth occurs.



Six Conditions of Systems Change



Mindsets, Mental Models, and Power

- Think for a second about your organization
- What mindsets or mental models might be underlying workplace issues?

- What power dynamics might be in place?
- Organizational Chart vs. Power Chart



THE ICEBERG MODEL



State of ICHD Workforce in 2021-2022

protection

Six Conditions of Systems Change

-Staff were pulled from other divisions to Resource address COVID creating intolerable workloads **Policies Practices** Flows - Led to significant burn out, trauma, and turnover Relationships -Services divisions (FQHCs,etc.) would not flex on using their Power staff to support COVID needs creating power imbalance **Dynamics** Connections -Structure and incentives did not support cross-divisional collaboration so no cross-divisional relationships and connections Mental -Mindset of providing services under a biomedical model -Models highest priority -Each division knows best how to provide its services - turf

And yet, we have high aspirations -> Health Equity

- COVID-19 exacerbated inequities in health. Simultaneously, George Floyd lost his life, unjustly from the police.
- Ingham County passed a resolution declaring racism as a public health crisis. This is a resolution to talk the talk AND walk it.

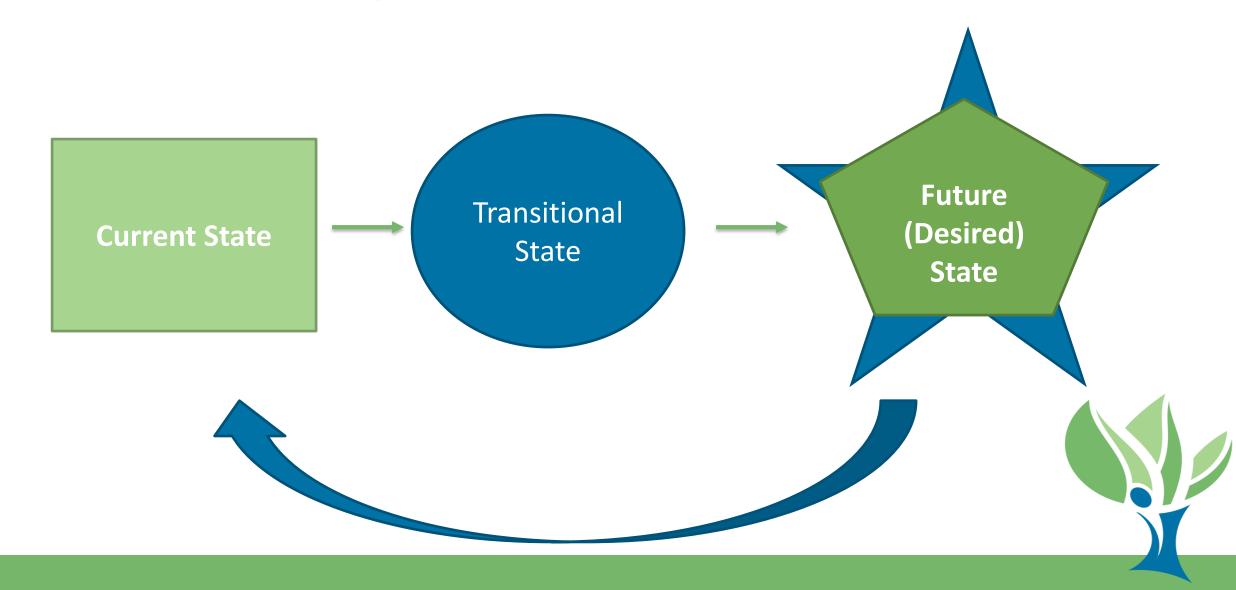
Health Inequities are differences in population health status and mortality rates that are *systemic*, patterned, *unjust*, and *actionable*, as opposed to random or caused by those who become ill.

Margaret Whitehead, The Concepts and Principles of Equity in Health. Health Promotion International 6(3): 217-28. 1992

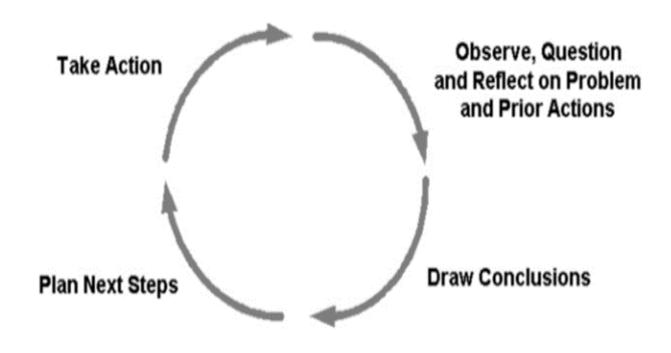
Ingham County Health Department (ICHD) has a longstanding history of community engagement and health equity and social justice initiatives.



How does change happen, really?



Cycles of Learning





Strategic Planning Model

Data and Information Gathering



Contextualizing and Meaningmaking



Strategy Selection



Implementation

Review of Internal Data,
Plans, Discussion
(Workforce Development,
Leadership Team)

Employee Interviews & Engagement Sessions

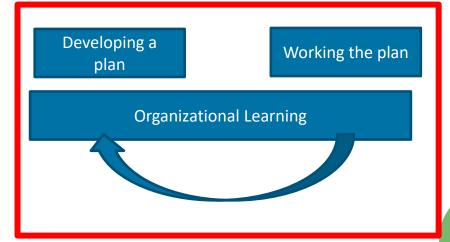
Mission, Mandates, Goals

Stakeholder Expectations

Review of Existing and Updated Community Data, Plans (CHA/CHIP)

Shared Vision

Identifying Strategic Issues



Questions Raised

Deeper Ideas Considered

Is the organization ready for transformational change toward power shifting?

Systems thinking: People are the system

Symptoms may be a trauma response

• Need for internal transformational change, first

Why is there organizational trauma?

- Trauma as a result of the COVID pandemic
- COVID exacerbated prior dysfunction
- Lack of trust or psychological safety

Why is internal collaboration stifled?

- Power dynamics within the organization
- Workforce equity → Importance of equity in strategy implementation

Are organizational leaders prepared to support organizational healing?

- Executive leadership alignment
- Do staff and managers have the right mindsets and capacity?
- Vision that honors legacy

ICHD Current State:

Traumatized by COVID which also exacerbated previous organizational dysfunction
Lacking psychological safety, few trusting relationships

Theory of Change for Health Equity Transformation

Future State:
Health Equity at
Population
Level
Power Shifting

Strategy:

Trauma-Informed Relationship Building

Leadership communication & presence

Holding rituals & ceremonies to reinforce sense of community and celebrate relationships, reward accomplishments, and grieve, regroup and orient to the future

Strengthen and develop relationships & positive networks and friendship ties

Create collaboration and cohesion across divisions

Strategy: Visioning Cocreation of vision, direction, and goals to create a sense of unity

Strategy: Adaptive Skill
Building Train on & apply
adaptive, innovative,
collaborative, &
transformational change skills

Strategy: Community
Engagement
ICHD facilitates multiple
community engagement &
collaborations

Power sharing with community

Communities invited to ICHD decision-making tables¹

Jointly strategize on how to advance health promoting work and policies, leverage ICHD's institutional power¹

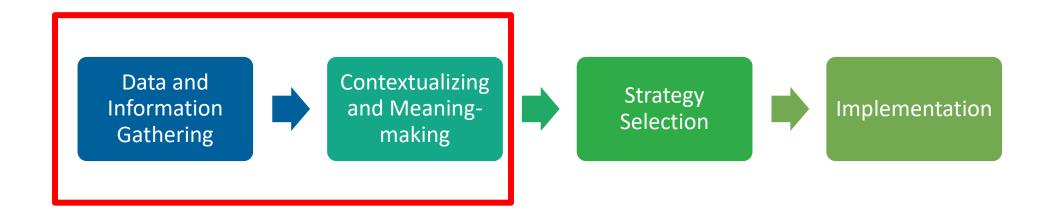
Intentionally build individual and organizational relationships with community orgs and members¹

Intermediate State:

Organizational Healing

1. Human Impact Partners. (2020). Building Power to Advance Health Equity: A Survey of Health Departments About their Collaborations with Community Power Building Organizations. Oakland, CA.

Strategic Planning Model





INTERNAL ASSESSMENTS

- Value problems
- Employee feedback is key to developing workforce initiatives
- Used to gather internal information to align with external research
- What do your employees think?
- How do they feel?
- Avoid "blind" interventions



INTERNAL ASSESSMENTS: THE "WHAT"

- Using external vendors
- Not limited to surveys
- Can be small, large, formal, or informal
- Quantitative and qualitative



THE "WHAT": QUANTITATIVE

- Most often used/seen for internal assessments
- Obtain and analyze numerical data to find:
 - Frequencies
 - Averages
 - Patterns
- Can be very simple
- Can be very complex
- Method dependent on what you want to know
- Methods
 - Survey
 - Opinion polls
 - Experiments



Participation Information and Consent

Participation in this assessment is voluntary, and you may stop participating in the assessment at any time without penalty. It will take an estimated 10-15 minutes to complete this assessment

Participant demographic information will not be individually identifiable, and no attempts will be made to identify individual survey participants or use their responses against them in any negative or punitive manner.

Raw data collected from this assessment will be kept securely in a password-protected file, accessible only by the ICHD Workforce Development Coordinator. Aggregate results from this survey will only be shared internally with the ICHD Workforce Development Committee and ICHD Executive Management to assist in strategic direction of staff training and development initiatives. Aggregate results will be shared externally outside of ICHD for the purpose of PHAB reaccreditation only.

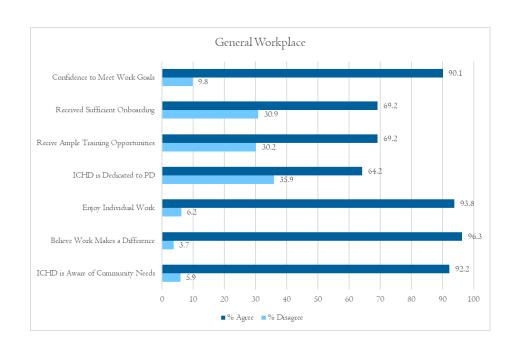
1. I consent to the outlined survey participation requirements and agree to proceed with the survey *





QUANTITATIVE (CONT.)

- Analyzed with statistical analysis
 - Descriptives
 - Frequencies
 - Averages
 - Inferential statistics
 - Correlations
 - Regressions
 - Chi-Square tests
- Pros:
 - Obtain large amounts of data
 - Find patterns
 - Compare to baseline
- Cons:
 - Does not tell you the "why"
 - Can be costly
 - Requires skills and training





THE "WHAT": QUALITATIVE

- May not be as commonly used in the workplace
- Used to obtain words, phrases, or themes that reflect thoughts, perspectives, or feelings of a small population
- Can be simple
- Can be complex
- Must be carefully structured
- Methods:
 - Case study
 - Grounded theory
 - Delphi
 - Generic inquiry



QUALITATIVE (CONT.)

- Method is dependent on project question
 - What are the feelings of...?
 - What are the perspectives of...?
 - How did XYZ happen...?
 - What is the best way to...?
- Data collection is dependent on method
 - Interviews
 - Narratives
 - Group discussions (focus groups)

Participant Identifier:	Interview Date:	
+ Start Time:	End Time:	
Question	Answer Notes	
TT11		

Question	Answer Notes
How long have you worked for	
ICHD?	
What are your perspectives	
regarding professional	
development at ICHD?	
 Are there adequate 	
opportunities currently?	
What could be improved?	
What did your new-hire	
orientation and onboarding	
experience involve?	
 What could be improved 	
in that experience? Do	
you believe ICHD does an	
adequate job recruiting,	
hiring, and onboarding	
new employees in	
general?	
Describe your working	
relationship with your peers and	
supervisors- do you feel you have	
a trusting, reliable working	
relationship with at least most of	
them?	
 If so, explain how that 	
was developed? If not,	
what barriers exist	

attributing to that?



QUALITATIVE (CONT.)

- Data analysis is dependent on method
 - Tools:
 - Frequency analysis
 - Inductive coding (line by line, values, etc.)
 - Deductive coding (line by line, values, etc.)
 - Techniques:
 - 6-phase thematic analysis
 - Categorical analysis
 - Narrative analysis
- Pros:
 - Answers the "why"
 - Variety of methods and techniques
 - Smaller sample population
- Cons
 - Can be a longer time commitment
 - Requires extensive planning
 - Requires skills and training

Professional Development/Training

73% of employees interviewed **report minimal or no opportunities for professional development and/or job-related training.** Many employees report favoritism regarding opportunities for professional development, and that receiving these opportunities is dependent on who you are and who you're asking. Some employees report scheduling barriers to professional development, despite requirements for training to keep job roles. A handful of employees report no issue receiving professional development opportunities, evidently tied to strong, supportive relationships with supervisors. Some employees report a desire for training opportunities to be provided regarding de-escalation and Diversity, Equity, and Inclusion (DEI).



INTERNAL ASSESSMENTS: THE "HOW"

- What type of assessment do we use?
- Depends on what you want to know
- Use appropriate methods
- May not be a one-time assessment
- Ethical considerations
- Participant recruitment
- Mandatory or optional?
- PLAN PLAN PLAN



INTERNAL ASSESSMENTS: THE "WHO"

- Who should be involved?
- It depends
- Consider who has the right skills to be involved
- Scale up and scale down as needed
- Ensure all employees have basic skills





INTERNAL ASSESSMENTS: THE "WHEN"

- How often should we conduct internal assessments?
- When you have a question you need answers to
- "Survey burnout"?
- Your employees want to be heard!





INTERNAL ASSESSMENT RESOURCES

- Microsoft/Google Forms
- R
- Alchemer/AOS group



The National Association of Local Health Department Data Collectors

DEVELOPING SOLUTIONS

- Identify potential solutions
 - Do some digging
 - Any solution from any industry may be considered
- Developing a workgroup
 - Power sharing
 - Power dynamics
 - Group Structure

Workplace Culture Visioning Exercise

Close your eyes for a few minutes and imagine working at Ingham County Health Department in five years.

After many years of tough conversations, advocacy, and changes to the status quo, the health department has created a healthy, equitable, and sustainable workplace culture. Turnover is low, morale is high, and we have a great reputation in the community and with other health departments for being a great place to work.

Try not to feel constrained by what's possible because of existing policies, procedures or because it's the way that it's always been done.

It's 10am on a typical work day. Try to imagine in concrete terms what a healthy workplace culture at our department looks, feels, and sounds like.





Workplace Culture Visioning Exercise



- What does the work space look like? Where are people sitting?
 Where and how are people working?
- How are staff accomplishments celebrated? What do you see?
- What does work in the community look like? Where is this being held?
- What do you hear when staff are talking within their teams?
- What do you hear when staff are talking with different units?
- In one-on-one check-in meetings, what do managers say to the people that they are supervising? What are employees saying to their managers?
- How are cross-agency meetings facilitated?
- What do you hear when the Health Officer shares agency updates with all staff?
- What do you hear when the Health Officer shares updates with senior management?

To the best of your ability, please write as much as you can about what you see, felt, or heard in concrete terms.

Facilitator passes out blank paper, markers, post-it notes.

Reflective Discussion

- What did you feel when you imagined what a healthy workplace culture looked or sounded like?
- Did you have any "aha" moments when listening to your colleagues describe the future workplace?
- What impact would a healthy workplace have on staff?
- How would the agency's relationships with external stakeholders change, if at all, if there was a healthy workplace culture?
- How, if at all, has this changed your thinking about workplace culture at the department?

"Regularly talking with different units about what they do, using this information to increase collaboration on mutual and overall goals"

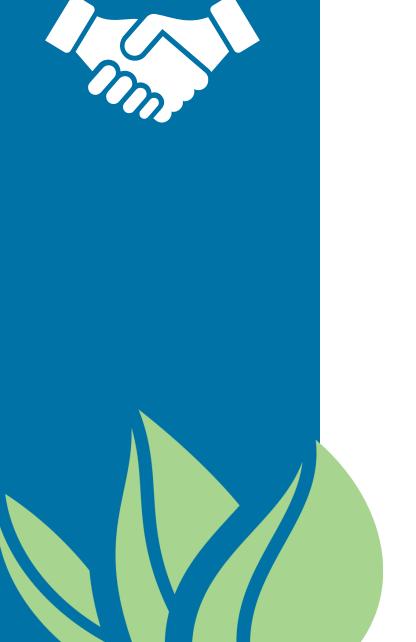
"I appreciate you"
"What do you need from me?"

"A focus for leadership development for staff at all levels (trainings, discussions, workgroups)."



ICHD EQUITABLE TRAINING INITIATIVE

- Derived from relevant assessment findings
- November 2023 Workforce Engagement Survey
 - ~30% of employees who participated in survey felt that they did not receive ample training opportunities
 - ~39% felt that ICHD was not dedicated to professional development
- December 2023 Qualitative Inquiry Project
 - 11 of 15 participants felt that there were significant barriers to receiving relevant training and professional development
 - Lack of opportunities available
 - Lack of funding available
 - Supervisor favoritism



ICHD EQUITABLE TRAINING INITIATIVE (CONT.)

- Announced via e-mail
 - Emphasis on those who don't typically get the opportunity to attend professional trainings
- Application Form with example
 - Explain how training related to COVID-19 preparedness and response
- Offered an open house to help folks find an opportunity and complete an application
- Reviewed by a subcommittee of WFD committee
- Some examples:
 - Addressing Long COVID
 - CHWs: Vicarious Trauma & Personal Resiliency
 - Microsoft Suite Training for Immunizations Staff
 - Epidemiology Conference (CSTE)
 - Public Health Improvement Training (PHIT)



OTHER EQUITABLE WORKFORCE INITIATIVES

- Dress Code Policy Review
- Strategic Planning 2023 Employee Input Project
- Emphasis on Organizational Healing and Culture
- Creation and Sharing of Health Equity Statement

Our Health Equity Statement

ICHD acknowledges that health is impacted by many factors.

One set of factors contributing to disparities is the way society, people, and institutions have been designed to preserve historical power through systems such as racism, sexism, ableism, heterosexism, and other forms of oppression.

To learn more, visit https://health.ingham.org/health/community-health, planning a nd partnerships/health equity and social justice.php

More info: Contact Dana Watson, dwatson@ingham.org



TAKEAWAYS

- Doing adaptive and transformative change is different than technical problem-solving
- Understand and leverage the full scope of workforce development initiatives
- Obtain employee feedback
- Multiple ways of exploring the problem
- Get data, then make meaning from it
- Develop solutions and learn from your experience implementing them
- Incorporate equity relentlessly



QUESTIONS?

THANK YOU!!!