

## 2012-2013 Accreditation Support Initiative (ASI) for Large Metropolitan Local Health Departments

### FINAL REPORT

#### 1. **Community Description**

*Briefly characterize the community(ies) served by your health department (location, population served, jurisdiction type, organization structure, etc). The purpose of this section is to provide context to a reader who may be unfamiliar with your agency.*

The Health Department is a combined city-county health department operating under an Interlocal Agreement between the City of Seattle and King County. The Department is administered by the County, which is financially responsible for the funding of core public health services throughout the county. The City funds enhanced services for its residents and neighborhoods.

Public Health is the one of the largest metropolitan health departments in the United States with approximately 1500 employees, 40 sites, and a budget of \$318 million. The department serves a resident population of 1.9 million people in an environment of great complexity and scale, with 19 acute care hospitals and over 7000 medical professionals. Over 100 languages are spoken here, and King County is an international destination welcoming 30 million visitors annually. The department serves both King County and the City of Seattle.

Department functions are carried out through core prevention programs, environmental health programs, community-oriented personal health care services, emergency medical services, correctional facility health services, public health preparedness programs, and community-based public health assessment and practices.

#### 2. **Work Plan Overview**

*Provide an overview of the work you conducted with or because of this funding, including the significant accomplishments/deliverables completed between December 2012-July 2013 under the auspices of this grant, and the key activities you engaged in to achieve these accomplishments. This should result in a narrative summary of the chart you completed in Part 1, in a format that is easily understandable by others. \*Note: Work with connector sites will be addressed in question #8.*

We chose to use our ASI funding to create a workforce development plan for the agency. The Northwest Center for Public Health Practice (NW Center) was planning to administer their training needs assessment (for the six-state northwest region they serve) in early 2013, so we piggy-backed on their effort. We provided input on the NW Center's needs assessment prior to administration. The Core Competencies for Public Health professionals were used as the framework for the needs assessment. We sent out internal communications to staff to encourage survey completion; the survey was completed by 67% of staff who received it. The NW Center analyzed data and wrote a report summarizing the findings.

The NW Center also conducted key informant interviews of top leadership / management of the health department, with a focus on current and future skills needed. Nineteen interviews were conducted, and the NW Center provided an executive summary and report of the findings.

We have analyzed data from the training needs assessment, the key informant interviews, a 2012 employee engagement survey, a 2012 county-wide employee development survey, input from supervisors and managers, and descriptive analyses of our current workforce. Using this data we have identified priority topics for training & career development, preferred approaches for acquiring these skills, and have recommendations for improving annual performance appraisal and development goals of individual employees.

In terms of deliverables, we have drafted our first agency workforce development plan, including a plan for tracking development activities and evaluation of development activities and the workforce development plan itself.

### 3. **Challenges**

*Describe any challenges or barriers encountered during the implementation of your work plan. These can be challenges you may have anticipated at the start of the initiative or unexpected challenges that emerged during the course of implementing your proposed activities. If challenges were noted in your interim report, please **do** include them here as well.*

As mentioned in our interim report, we had several staffing changes that impacted our progress. Vacancies in the Human Resources and Administration management led to backfilling of positions and temporary changes in bodies of work. Human Resources staff were not able to devote as much time as was originally anticipated to the planning and writing of the workforce development plan.

Another challenge in completing the work in the time frame was the amount of data we had to review and analyze. Sorting through numerous data sources and distilling down the key priorities and emerging patterns has been challenging; we found that we could easily devote another year to this.

One challenge that we were aware of going in to this project is that we do not have dedicated organizational development staff at PHSKC. The primary duties of Human Resources staff are filling vacant positions and managing protected leave. One of the workforce development plan goals will likely be to identify resources for organizational development.

Another challenge was related to using a contractor to complete part of the work. Both King County and the University of Washington have long and complex contracting processes, but also have a long history of collaboration. Getting a signed contract took far longer than anticipated. Thankfully, out of this process we have a boilerplate for future King County / University of Washington contracts that has been accepted by attorneys for both entities.

#### 4. **Facilitators of Success**

*Describe factors or strategies that helped to facilitate completion of your work. These may be conditions at your organization that generally contributed to your successes, or specific actions you took that helped make your project successful or mitigated challenges described above.*

The most important factor in the completion of this project is interest in the agency. There is a high level and interest in the completion of a workforce development plan. Our department director and division managers are very interested in workforce development. They are interested in shaping the future of the department, and are very interested in better recruitment, development, and retention. Staff completed a lengthy survey, managers and leaders completed 45-minute interviews; there has been strong support.

A second supportive factor was a focus on “quality workforce” in the King County Strategic Plan (2010-2014) and the King County Enterprise Work Plan, The Strategic Plan includes the objective “Develop and retain quality employees” and the Human Resources workplan includes the priority “Develop Employees: We will build the workforce of tomorrow by investing in the workforce of today.”

#### 5. **Lessons Learned**

*Please describe your overall lessons learned from participating in the ASI. These may be things you might do differently if you could repeat the process, or the kinds of advice you might give to other health departments who are pursuing similar types of funding opportunities or technical assistance activities.*

We learned several things through participating in the ASI grant. We learned that we could spend far longer on this than the funded grant period; the data are rich and the topic has breadth and depth. We also realized that we can update the plan next year, and it is more important to have an actionable plan that we intend to revise and update annually, than it is to have a perfect plan.

#### 6. **Funding Impact**

*Describe the impact that the ASI funding has had on your health department. In other words, thinking about the work you have done over the last eight months, how has this funding advanced your health department’s accreditation readiness or quality improvement efforts?*

Without the funding to start the workforce development project, we likely wouldn’t have begun to work on it in 2013. Once we began, we found out how much interest and support there is for workforce development in the agency. The agency has never had a department-wide workforce development plan, and we have never had these high level discussions about training and development, especially with a focus towards the future. Tackling this work makes some of the other accreditation preparation work seem less daunting.

The grant provided funding to send staff to an out of state training that they would not have otherwise been able to attend. Being able to send staff to a meeting was helpful in that it created one more public health accreditation champion in the agency.

## 7. **Next Steps**

*What are your health department's general plans for the next 12-24 months in terms of accreditation preparation and quality improvement?*

1. We plan to complete our Community Health Assessment, Community Health Improvement Plan and Strategic Plan in the next 12 months. We will continue supporting Lean and continuous improvement efforts, and to further develop and implement our performance management system.
2. We will investigate whether SharePoint will be the platform we use for collecting, reviewing and selecting PHAB documentation. If so, we will start to develop that SharePoint site.
3. We will begin implementing our workforce development plan.

## 8. **Working With Connector Sites**

*Describe your health department's work with your connector site(s) during this initiative. Include the following:*

- *How did you identify your connector site(s)?*
- *What type of TA or resources did you provide to the site(s)?*
- *How do you think this TA helped advance the site's accreditation readiness?*
- *What benefits did you experience?*
- *What challenges did you face?*

We worked with Whatcom County for our 2011-2012 ASI grant, working on performance management. We contacted several health departments this time around, and Whatcom was again interested. They are in the application process for accreditation, but have not completed a workforce development plan.

We have talked with Whatcom County Health Department several times, including a conference call with their Staff Development Committee. We provided examples of workforce development plans that we have gathered from other agencies, and other workforce development resources they were previously unaware of.

Whatcom County Health Department has until mid-October to submit their documentation for accreditation, so we shared templates with them they can use for the workforce development plan. They are a much smaller agency than Public Health – Seattle & King County, so we talked about how they might gather information from their staff regarding training needs and priorities in management meetings, rather than taking the time for individual interviews.

It was beneficial to see the work our connector site has completed around workforce development. They developed a 6-month orientation plan for new employees; we do not have a similar standard document or process for new staff.

The challenges we faced were identifying a connector site, and finding the time to meet for technical assistance or training. The staff of smaller health departments are at capacity in terms of workload and time. Though free training and technical assistance might be welcome, there wasn't much interest in becoming connector sites. Once we identified a connector site, it was still difficult to find the time to meet.