San Francisco Department of Public Health

STRATEGIC PRIORITIES

January 7, 2020
OUR MISSION
PROTECTING AND PROMOTING HEALTH AND WELL-BEING FOR ALL IN SAN FRANCISCO

OUR VISION
MAKING SAN FRANCISCO THE HEALTHIEST PLACE ON EARTH
The DPH Triangle is a visualization tool that communicates our mission, vision, True North and principles.
Hoshin Kanri is a process for identifying and deploying strategic priorities

Hoshin is both:

- Strategic planning event(s)
- Year long process for deploying improvement work
Hoshin Kanri’s Year Long Life Cycle

Measurement Year starts July 2019 – Jun 2020

Tier 1
- SFHN / PHD Hoshin Kanri
- Deploy A3s
- A3-T Development
- Implement A3 – Monthly Review - Adjustments
- Mid-Year Review

Tier 2
- ZSFG / LHH / PC / Environmental Health Hoshin Kanri
- Deploy A3s
- A3-T Development
- Implement A3 – Monthly Review - Adjustments
- Mid-Year Review

Tier 3
- Deploy A3s
- A3-T Development
- Implement A3 – Monthly Review - Adjustments
- Mid-Year Review
Cascading Hoshin through the Department

Executive - Provide a vision for the organization

Division & Section – Identifies the Division’s/Section’s role in supporting the DPH strategic vision

Unit – Focuses on a specific portion of the problem
SFDPH 5 Strategic Priorities

Level 1: Infrastructure Development

Level 2: Service Delivery

Behavioral Health

People
Staff Engagement

Advancing Equity

Process
Lean

Tools
Data Science

Homelessness Health
STRATEGY 1 – ADVANCING EQUITY

TRUE NORTH ALIGNMENT: Health Impact, Workforce, Equity, Care Experience

GOALS

• **Reduce health disparities** through care and program improvements across the department

• Create an **equitable and respectful workplace** with opportunity for all

• **Train staff** to recognize racism and inequity at individual and organizational levels

• **Establish the department’s infrastructure** to improve planning, resourcing, and accountability for equity work

• **Align this work with the Office of Racial Equity** at the Human Rights Commission and with the efforts of other city agencies

PROGRESS INDICATORS

EX:

1. Elimination of the disparity between B/AA patients and all patients at DPH clinics

2. Increase staff favorable survey rating of respectful treatment

3. Number of sections participating in planning, infrastructure creation, and deployment of champions and respect policies
GOALS

• Promote a culture of open and respectful communication, and an inclusive environment for all employees

• Improve baseline training for staff as part of the initial introduction and orientation to the organization

• Advance racial equity for our workforce and our community

PROGRESS INDICATORS EX:

1. Improve staff survey scores measuring trust and respect
2. Improve overall staff engagement scores on department wide staff engagement survey
STRATEGY 3 – LEAN TRANSFORMATION

TRUE NORTH ALIGNMENT:  
All Pillars

GOALS

• Create organizational focus on those critical issues which matter most

• Ensure that strategic planning is communicated and deployed both horizontally and vertically to align departmental priorities

• Create an organization of 8000 daily problem solvers

• Deploy a daily management system to engage all staff in daily improvement

PROGRESS INDICATORS  
EX:

1. Number of units across the department using daily management systems
2. Number of staff trained in data driven problem solving
STRATEGY 4 – TURNING DATA INTO ACTIONABLE KNOWLEDGE

TRUE NORTH ALIGNMENT:
All Pillars

GOALS

• **Improve our information management and analytical capabilities** to enhance our ability to assess, understand, and respond to the needs of the populations we serve

• **Increase accessibility to information** to meet daily operational demands

• **Develop our workforce to use data effectively** to support problem solving, analysis, and decision making

PROGRESS INDICATORS
EX:

1. Deploy Epic at additional DPH sites
2. Increase number of staff trained in problem solving
3. Complete the initiation of value-based care reporting with the use of the EHR
GOALS:

• **Create a unifying vision** for the delivery of behavioral health services to adults experiencing homelessness

• Apply a **population-based approach** to behavioral health care

• **Identify sustainable, systematic, innovative opportunities** for improving SDPH’s system of care for the target population

• **Advance equity** to eliminate health disparities in vulnerable populations

• Use **data and evidence-based best practices** to inform and guide decisions

**TRUE NORTH ALIGNMENT:**
Safety & Security, Health Impact, Financial Stewardship, Equity

**PROGRESS INDICATORS, EX:**

1. Increase percentage of the priority population who are retained in “recovery and wellness” behavioral health care.

2. Reduce the number, length and frequency of behavioral health crisis events

3. Increase the number who maintain housing
Current Learnings

• Promote strategic deployment as a yearlong process
• Deeper vertical alignment
• Visual management and visibility walls support accountability and transparency
• Prioritization requires de-prioritization