# THE NEW POPULATION HEALTH DIVISION Transforming Public Health in San Francisco

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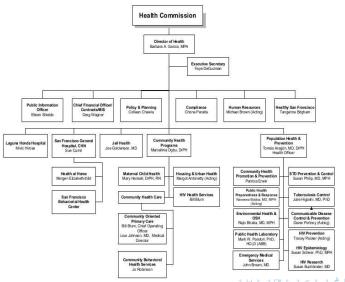


# Outline—The New Population Health Division

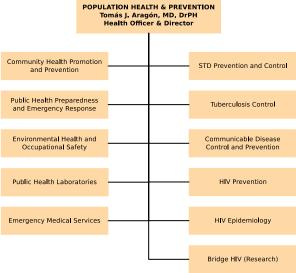
- 1 Why? The Future of Public Health In San Francisco
- 2 How? Organization Design Roadmaps
- 3 What? Organization Design Destination
- 4 When? Time Line



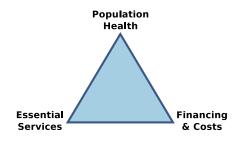
## 1. San Francisco Department of Public Health, Nov 2012



## 2. Evolution of San Francisco's "Public Health" Division



## 3. Roadmap to the Future—Public Health "Triple Aim"



## Emerging changes in . . .

- population health challenges,
- 2 public health services, and
- health financing,

provides tremendous public health leadership opportunities.



When? Time Line

# 4. PHD Organization Design Approach

## Stakeholder input

- SF Health Commission priorities (e.g., accreditation)
- Director of Health priorities (Director Garcia)
- Focus groups (staff [6] and community [17])
- PHP Directors (retreats, Strategic Map)
- SF Community Health Improvement Planning
- SF Health Care Services Master Planning

## Models and Methods

- Review organization design models and methods
- Consultations with Drs. Naomi Stanford and Glen Mays



# 5. Organization Design Stakeholder General Themes

- Lead SFDPH efforts in health protection, health promotion, disease prevention, and disaster preparedness
- Be community-centered ("healthy people")—not pathogen-centric
- Promote healthy, sustainable environments ("healthy places")
- Operationalize division-wide focus on health equity
- Become agile, adaptive, and responsive to emerging challenges
- Strengthen <u>service excellence</u> to communities, clients, and providers
- Become a learning organization with a culture of trust, innovation, and continuous improvement
- Strengthen culture of discovery and world class research
- Achieve and maintain Public Health Accreditation



When? Time Line

## Vision and Mission

Why? Our Future

**DPH Mission:** To protect and promote the health of all San Franciscans

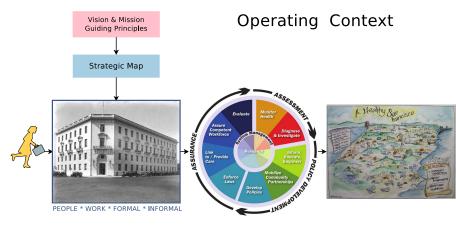
PHD Vision: To be a community-centered leader in public health practice and innovation

**PHD Mission:** Drawing upon community wisdom and science, we support, develop, and implement evidence-based policies, practices, and partnerships that protect and promote health, prevent disease and injury, and create sustainable environments and resilient communities.

## Organization Design Guiding Principles

- Decide and act as one health department and one division
- Create integrated systems that are community- and client-centered
- Create integrated systems that maximize our collective resources
- Engage diverse stakeholders at all phases
- Protect and promote health equity

# 7. Organization Design "Open System" Model (Stanford)





Logic Model

# 8. Population Health Division Strategic Map, 2012–2015

#### GOALS AND ORIECTIVES 2012-2015 STRATEGIC DIRECTIONS GOAL 1: Build an integrated information and knowledge management infrastructure that enables us to monitor health, to inform and guide activities, and to improve staff and systems performance. 1. Superb knowledge OBJECTIVES: management systems and . 1.1. Build a strong, highly functional information technology (IT) and technical assistance infrastructure in alignment with Department of Public Health IT strategy. empowered users · 1.2 Establish a highly functional, integrated infectious disease system to collect and report data, and to deliver and monitor public health actions. PUBLIC HEALTH ACCREDITATION (PHA) DOMAINS CATEGORIES GOAL 2: Integrate, innovate, improve, and expand efforts in community and environmental assessments. 2. Assessment and research research, and translation. aligned with our vision and OBJECTIVES: 2.1 Create an action plan that supports division priorities. priorities · 2.2 Build cross-section interdisciplinary teams to improve health outcomes and programmatic activities. GOAL 3: Conduct effective policy & planning that achieves collective impact to improve health and well-being for all San Franciscans. OBJECTIVES: 3. Policy development with 3.1 Establish a division-wide Performance Management, Equity & Quality Improvement Program. collective impact · 3.2 Establish systems and partnerships to achieve and maintain Public Health Accreditation. 3.3 Develop a prioritized legislative agenda and strategic implementation plan to address health status and inequities. GOAL 4: Lead public health systems efforts to ensure healthy people and healthy places OBJECTIVES: 4. Assurance of healthy · 4.1 Establish community-centered approaches that address the social determinants of health and increase places and healthy people population well-being. 4.2 Sustain and improve the infrastructure and capacity to support core public health functions, including legally mandated public health activities.

5. Sustainable funding and maximize collective resources

6. Learning organization with a culture of trust and innovation.

GOAL5: Increase administrative, financial and human resources efficiencies within the division.

- 5.1 Establish a centralized business office for the division.
- 5.2 Appropriately address the human resource issues regarding civil service and contract employees.
- 5.3 Establish a centralized grants management and development system for the division.

GOAL 6: Build a division-wide learning environment that supports public health efforts.

· 6.1 Establish a division-wide Workforce Development program.



# 9. Systems Roadmap for Public Health Accreditation: The Baldrige Criteria for Performance Excellence

#### Reacting to Problems

Why? Our Future



Early Systemic Approaches



### Aligned Approaches



#### Integrated Approaches





http://www.nist.gov/Baldrige



# 10. Organization Design—Summary of Changes

## John Galbraith in Designing Matrix Organizations that Actually Work

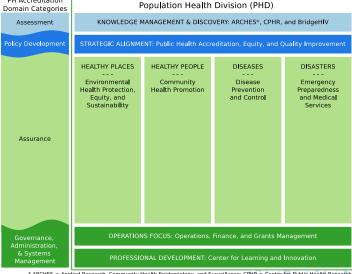
"A company's organization chart is a display of its intended strategic priorities."

- Integrate assessment, surveillance, epidemiology, applied research, and informatics to support division, DPH, and citywide efforts
- Integrate disease prevention and control services
- Integrate specialists in community engagement, planning, and mobilization to focus on the "Spectrum of Prevention" \*
- Create division-wide infrastructure to support professional development, quality improvement, grant development, operations and fiscal efficiencies, and public health accreditation

<sup>\*</sup>Influencing policy and legislation; Mobilizing neighborhoods and communities; Fostering coalitions and networks; Changing organizational practices; Educating providers; Promoting community education; and Strengthening individual knowledge & skills. Source: http://www.preventioninstitute.org



# 11. Population Health Division—Organization Design 1/2



\* ARCHES = Applied Research, Community Health Epidemiology, and Surveillance; CPHR = Center for Public Health Research

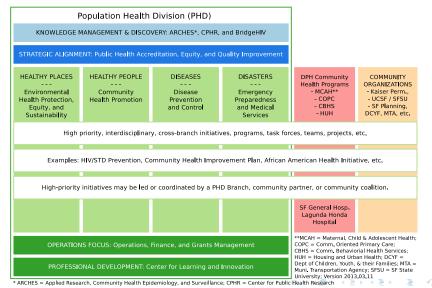


When? Time Line

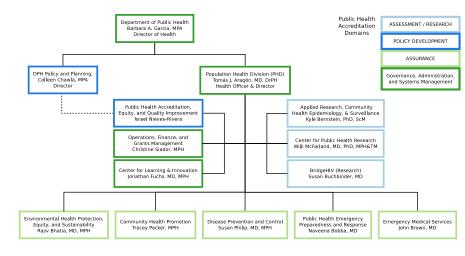
Why? Our Future

PH Accreditation

# 12. Population Health Division—Organization Design 2/2



## 13. Population Health Division—Organization Chart



When? Time Line

Why? Our Future

## 14. PHD Organization Design Time Line

The organization design will be accomplished in three phases:

## Phase I: November 1, 2011-March 19, 2013

Culminates in the release of an initial, high-level structure of the new Population Health Division.

## Phase II: March 19, 2013-June 28, 2013

Engage staff across the Division to have open discussions about Division and Branch priorities, and to design Branch structures and work processes.

## Phase III: July 1, 2013

The new PHD structure will go into effect on July 1st. Phase III will also involve planning for moving staff to new locations to facilitate more meaningful interactions between staff in the new structure.



## PHD — Transforming Public Health in SF — Questions?





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