

Connecticut's Leadership Development Program

July 17, 2018

CSTE/ASTHO Webinar Series on Succession Planning



Connecticut Department of Public Health
Keeping Connecticut Healthy



Performance Management and Culture of Quality Assessment

Highlights of the Performance Management Assessment

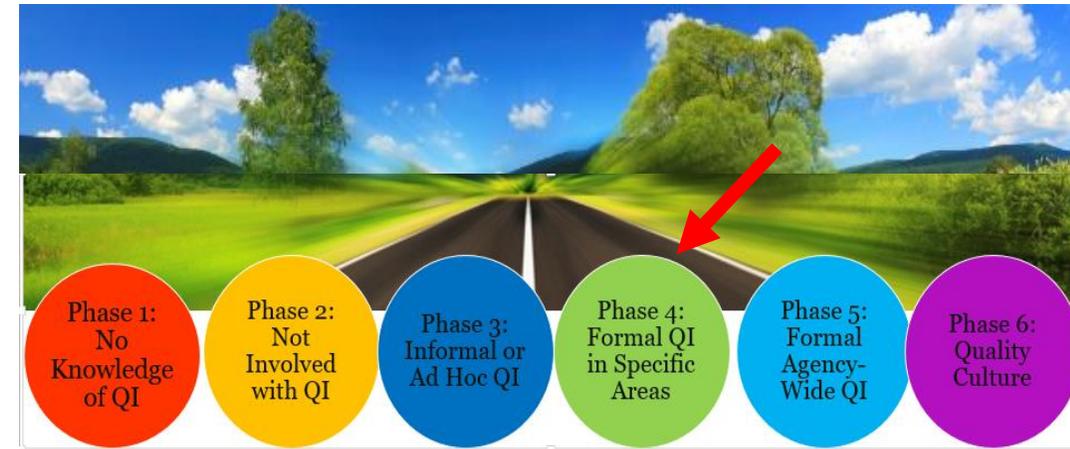
- Most managers think that leadership nurtures a performance improvement culture but staff say that leaders sometimes to never support a nurturing environment related to performance improvement.
- Management and staff responded overwhelmingly that incentives are almost never or never in place for performance improvement
- And yet a QI inventory found there were 16 active projects spanning 8 of 10 sections.

Public Health Performance Management System



From: Turning Point Performance Management System Framework, Updated by the Public Health Foundation, 2013.

Where are we on the QI Highway



From: National Association of County and City Health Officials

How We Ranked on the Six Ingredients of a Quality Culture and Selected Focus Areas to Improve

Category	Now	1 Year
	Average	Average
Commitment	3.4	4.25
Capability	2.175	3.125
Customer Focus	3.05	3.225
Empowerment	2.275	2.925
Process Focus	2.625	3.25
Institutionalization	1.45	2.3

From: Public Health Foundation

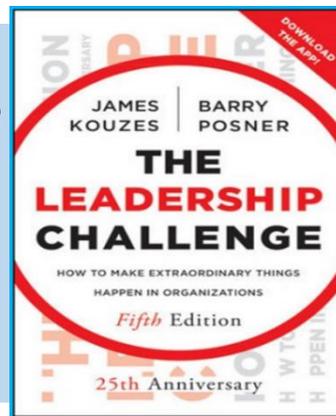
Components of the Leadership Development Program

- Self-Awareness through the Enneagram personality profiler
- Five Exemplary Leadership Practices™
- 360° Leadership Practices Inventory
- Leading Organizational Change
- Individual Leadership Development Plan
- One-on-one coaching
- Feedback session and sharing



Five Exemplary Leadership Practices

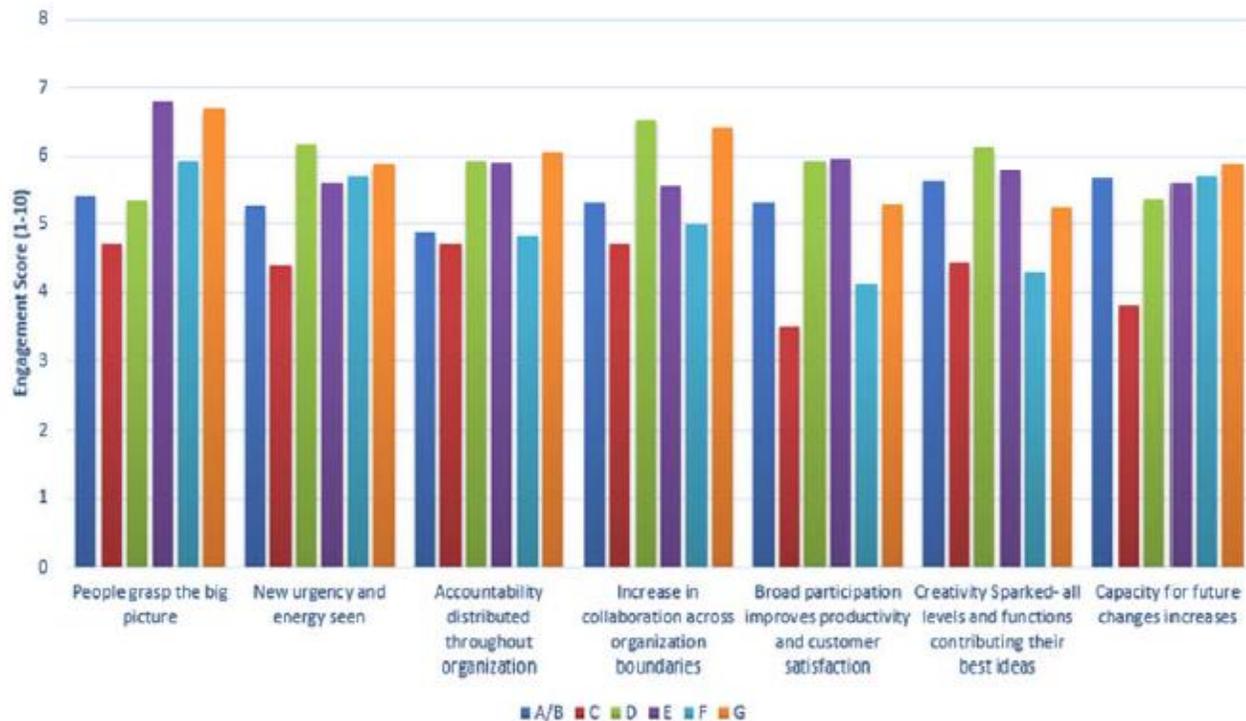
- Model the Way – set an example
- Inspire a Shared Vision – envision a better future
- Challenge the Process – seek opportunities to improve
- Enable Others to Act – provide opportunities to contribute
- Encourage the Heart – recognize achievements



- Eligibility
 - Application process for initial cohorts
 - Sessions for Supervisors, Managers
- Frequency - offered twice per year
- Funding - federal funds, state and/or combinations of funding sources.
- Components
 - Enneagram Personality Profiler
 - 360° Reviews
 - Individual Leadership Plan
 - 1:1 Coaching
- Additional Topics
 - Peer Coaching and Peer Coaching Collaboratives
 - Organizational Climate

Connecting the Dots: Emerging Leaders and Performance Excellence

Rating of How Engaged DPH is as an Agency 7 Leadership Participant Cohorts



Leading Organizational Change

- **Widen the Circle of Involvement** – sought volunteers for the Public Health Strategic Team, instead of the usual players and rotation of service.
- **Connect People to Each Other** – have had people share why they want to be involved and share personal stories.
- **Create Communities of Action** – done through QI and LEAN learning collaboratives, implementing State Health Improvement Plan with Action Teams.
- **Promote Fairness** – all staff have had the opportunity to contribute to positive change in the agency through various initiatives.

Connecting the Dots: Emerging Leaders and Performance Excellence

Leaders in Action

246 staff or 27% of DPH has been through the Program

10	Served as members of the QIC
24	Have taken LEAN training
13	Participated in LEAN events
14	Participated in a QI Project
19	Served as a member of the Public Health Strategic Team

“I have used my individual leadership plan to model the way by being proactive and keeping a positive attitude. I have seen this affect others on my team. We are all working on a quality improvement project and are excited to improve upon the work we do.” **Engineer, DPH Drinking Water Section**

PEER Coaching

“Helped me to problem solved – felt empowered”

“Will change the conversation and energy at the agency”

“This is a big opportunity”

“I think there is a shift happening in the agency”

“I was thinking about leaving because I felt complacency but this changed my whole attitude and I’m not looking to leave”

“This is culture change”

Leadership Program Evaluation

- Individual Participant Evaluations
- Participant Feedback Sessions
- Monitor Participation
 - % of staff trained for tipping point/impact
 - Participation by staff level and division
- Review data and feedback with LGH and adjust or add to program
- Survey data on employee/job satisfaction, training and engagement
- Participation in quality and performance initiatives

Connecticut DPH: Workforce and Satisfaction Survey Results

- DPH Employee Satisfaction Surveys
 - Improvements in all areas surveyed (e.g., employee satisfaction, professional development, and employee relationships) since 2013 but challenges remain.....
- Public Health Workforce Interests and Needs Survey Results
 - Improvements in engagement from 2014 but...
 - 30% of workers plan to leave governmental Public Health in 2018
 - Opportunities to improve worker engagement: reward creativity and innovation; assess training needs, training to utilize technology
 - Training needs in systems thinking, budget and financial management, and change management



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Strategic Plan

DPH Employees are Proactive and Supported in Professional Development to Enhance Public Health Practice

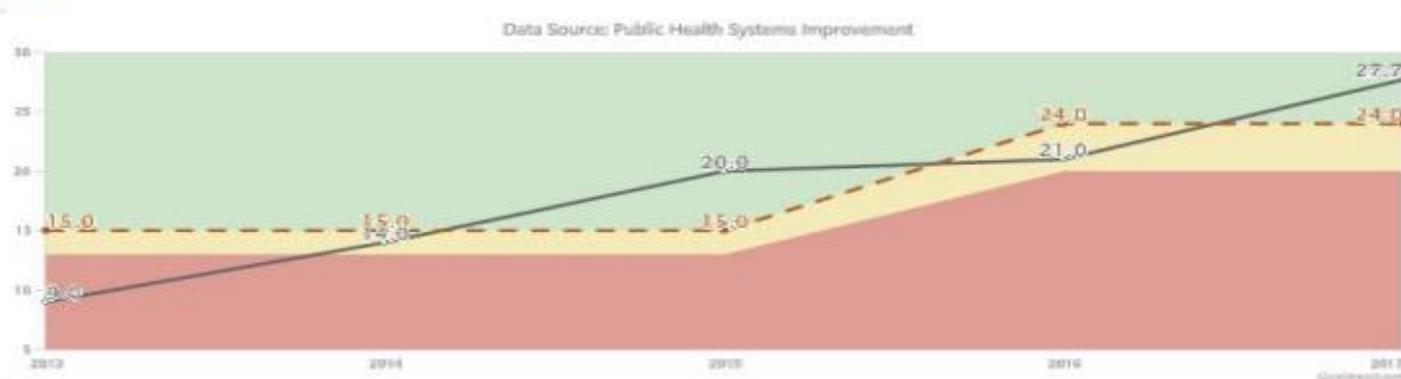
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Strategic Plan

Public Health Workforce Development

Time Period	Actual Value	Target Value	Current Trend
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P.M % of staff trained in leadership development



Time Period	Actual Value	Target Value	Current Trend
2017	27.7	24.0	↗ 4
2016	21.0	24.0	↗ 3
2015	20.0	15.0	↗ 2
2014	14.0	15.0	↗ 1
2013	9.0	15.0	→ 0

P.M % of DPH programs with performance measures and targets in the dashboard



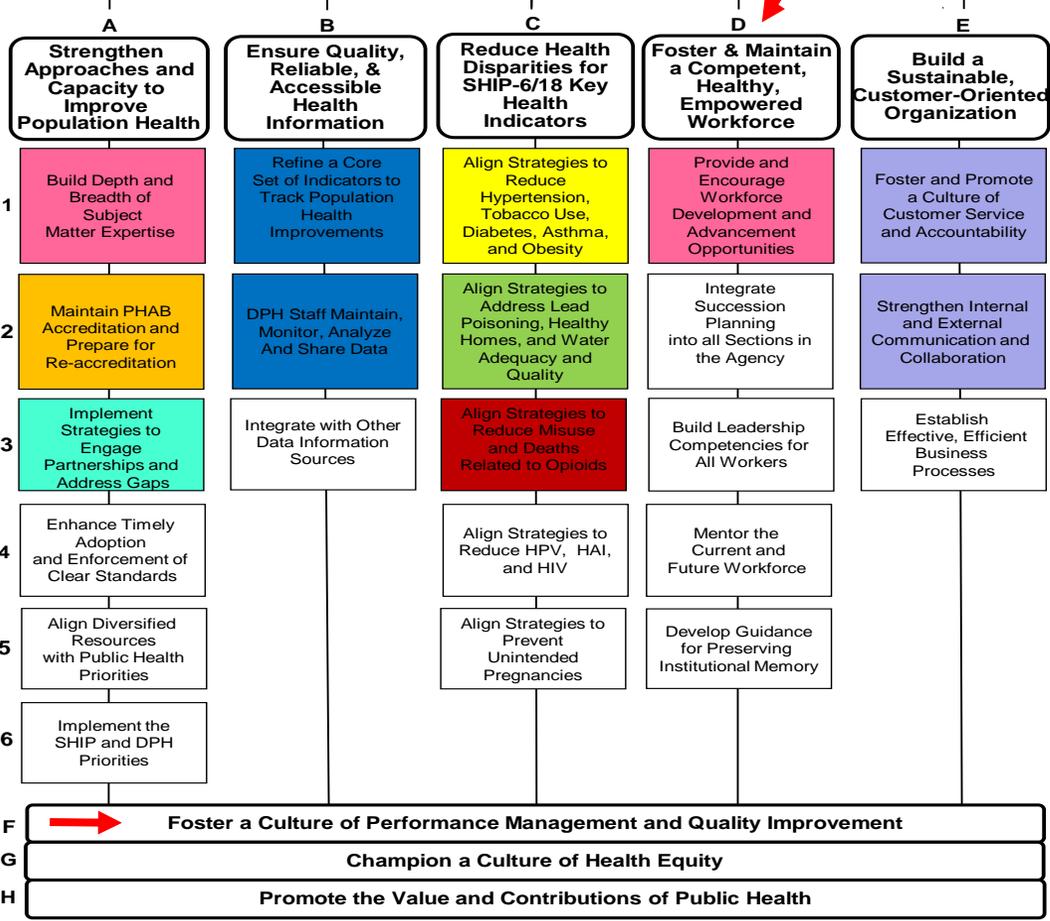
Time Period	Actual Value	Target Value	Current Trend
Q1 2018	61	70	↗ 1
Q4 2017	55	70	→ 1
Q3 2017	55	70	↗ 4
Q2 2017	53	70	↗ 3
Q1 2017	49	70	↗ 2
Q4 2016	46	70	↗ 1
Q3 2016	42	60	→ 1
Q2 2016	42	50	↗ 4
Q1 2016	38	50	

DPH Strategic Priorities: Workforce and Quality

Connecticut Department of Public Health Strategic Map: 2017-2018

Improve Population Health in Connecticut Through Engagement, Innovation, Expertise, Leadership And Action

Revised 2/7/17



Workforce Development Plan Targets and Timelines



Succession Planning/Institutional Memory Tools

- Developing Capacity of Future Leaders
 - Individual Development Plans
 - Developing Employee Expertise – Supervisor’s Quick Guide
 - Leadership Development training and peer coaching models
 - Supervisor Training – building strong supervisory capacity
- Policies and Tools to Support Institutional Memory
 - Employee separation policy and procedure that includes links to tools
 - Legacy Binder
 - Expert Interview Questionnaire
 - File organization guidelines

Overview for Supervisors

Developing Employee Expertise is the process of building the agency's capacity and depth in public health science and skills, and its ability to respond to emerging public health issues. Employee expertise must be developed and maintained for the agency's credibility, to be a reliable resource for the public, elected officials, and other constituents, and to ensure high-performance.

This Supervisor's Quick Guide provides guidance and information about your role in developing employee expertise. It also includes tips and resources that you can use to help ensure employee expertise in your program or section.

What is Employee Expertise?

Individuals with expertise have a deeper understanding of a particular process, function, technology, or type of equipment. They are typically sought out by others interested in learning more about or leveraging their unique expertise to help solve specific problems or develop innovative approaches to meeting public health challenges.

At DPH, employee expertise is also leveraged to help government relations and communications office to respond to media calls; to provide health information and prevention messages to the public, elected officials, and other constituents; to interpret research findings and develop policy options; and to train and mentor the next generation of public health workers.

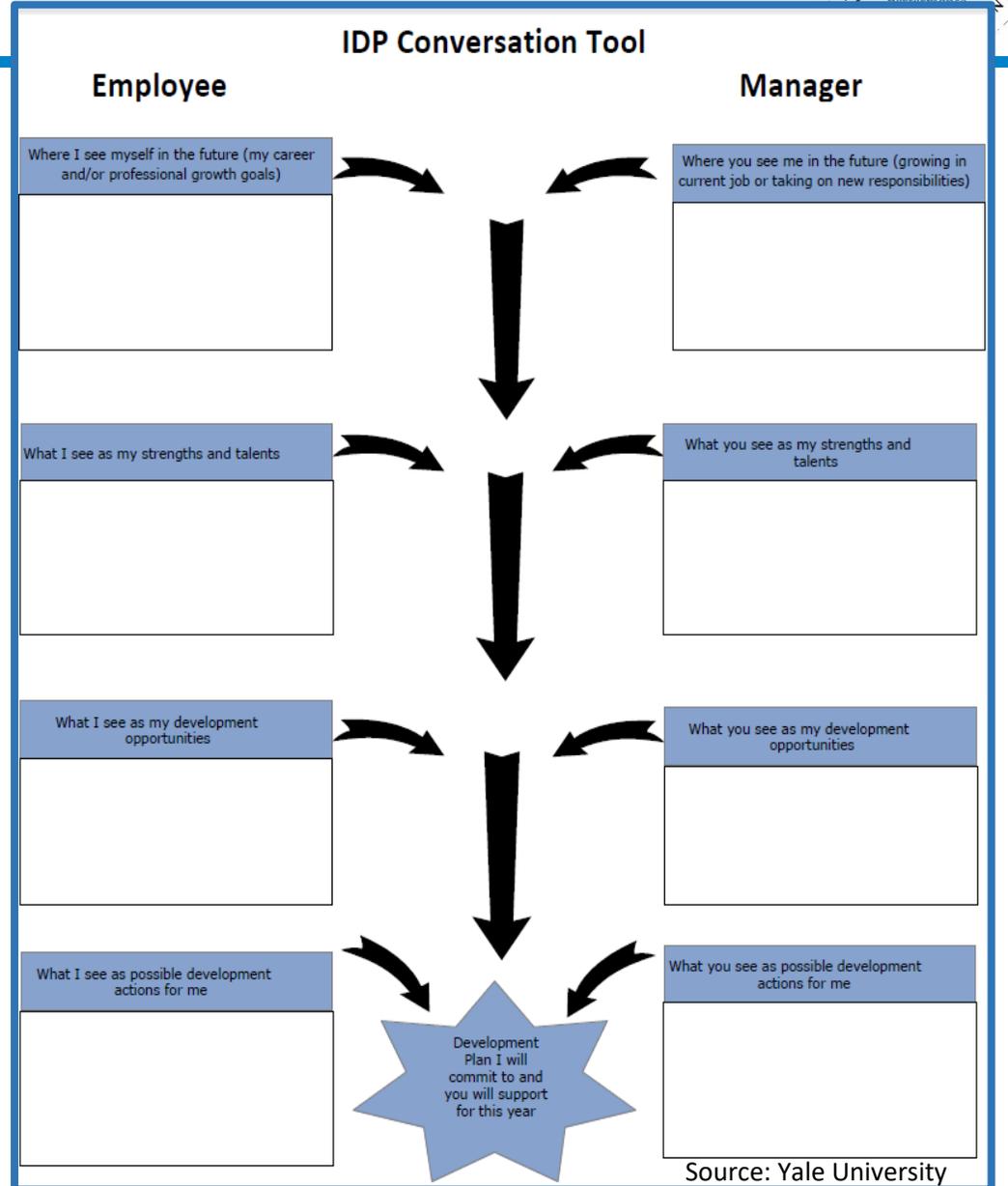
Employee expertise is typically developed over a long period of time and with significant immersion in a topic area. Many experts have pursued advanced degrees and demonstrate a commitment to lifelong learning and program of continuous study in their field. Many publish books or articles on their topic and serve as educators in colleges and universities or editorial review boards which help to build and maintain expertise.

- Ways to Develop Employee Expertise**
- Promote a Learning Culture in Your Area**
 Culture is a way of thinking, behaving or working that exists in a place or organization. In a learning culture, the acquisition of knowledge and skills is supported by the organization. You can promote a learning culture by:
 - Providing freedom to express ideas and diverse opinions;
 - Providing opportunities for people to become resources for each other;
 - Encouraging formal and informal evaluation of your program's activities to create learning and positive change;
 - Encouraging innovation and calculated risk taking;
 - Accommodating different learning styles;
 - Encouraging employee development and career advancement.
 - Support Individual Development Plans**
 Individual professional development planning is a national public health practice standard to help ensure a competent workforce and build a supportive work environment. Use of an individual development plan (IDP) prompts you to:
 - Identify your strengths, talents, passions and plan ways to use them on the job.
 - Consider and identify your personal goals for professional development.
 - Set goals to learn or improve in important competencies you will need now or in the future.

At DPH, development and use of an individual development plan is voluntary and initiated by individual staff working with a mentor or supervisor. A template for staff is available on the [agency intranet](#). Supervisors should support staff that initiate IDPs, as well as model use of IDPs.
 - Ensure Training & Mentoring**
 Training/mentoring can be conducted by experienced team members who can competently perform the job they are teaching. These staff can provide hands-on training, model successful practices, and teach the skills, knowledge and competencies needed for employees to perform their job duties.

Examples of how your peers are developing employee expertise:

 - Look for teachable moments in real life situations. Use [storytelling](#) as a way to help staff connect to outcomes.
 - Identify and/or rotate staff to respond to inquiries and questions, and develop responses based on literature/evidence.
 - Allocate funds and allow staff time each year for professional development.
 - Hold bimonthly meetings with internal or external speakers. Have staff present on what they have learned from a project or in handling a situation.
 - Rotate staff attending regional and national meetings for learning and networking. Encourage staff to submit an abstract and present findings for scholarship opportunities.
 - Identify/share available online and in-person learning opportunities that build awareness and knowledge of public health content and emerging issues.
 - Cross train staff to build professional and technical skills, and reduce boredom and stagnation. Ask for volunteers to lead an initiative or internal training, or participate in agency-wide committees and activities.
 - Use the [DPH Digital Library](#) to help identify and share important journals/journal articles.
 - Encourage Academic Partnerships
 - Encourage staff to join a professional association such as CPHA/APHA, or identify national organizations on the cutting edge of health and ensure you receive news and announcements.
 - Use expert interview form to capture and share institutional knowledge of departing staff.
 - Recognize employees for their efforts and initiative in developing their own expertise.



EXPERT INTERVIEW QUESTIONNAIRE

Subject Matter Expert: _____

Description: A general knowledge interview followed by a list of vital information pertinent to this position which includes the following subject areas: **technology, processes, performance enhancement mediums, and resource tools.** (Examples are provided within the instructions for each subject area.) **Purpose:** The purpose of this questionnaire is to capture information pertinent to this position and its source and/or storage location.

GENERAL KNOWLEDGE INTERVIEW

1. What are the projects, ongoing tasks, tips, information and other open items you are currently working on?
2. What are the barriers or obstacles to completing these tasks and projects?
3. Please identify the top 3 things that often go wrong when someone is learning the principles and practices of this position.
4. Who are the key people, both internal and external to whom a replacement should be introduced before you leave the agency? Make a list and indicate when introductions will happen. If appropriate share a list of all contacts.
5. Identify external agencies and regulatory groups (i.e. Municipality/State/Federal) with whom it is necessary for us to interact in order to fulfill duties of your position.
6. As it relates to the supervisory responsibilities in this position, explain how you recognize quality work?
7. Are there any processes or procedures that should be improved?
8. Are there any relevant historical issues that should be considered?
9. Are there specific files/records related to current or past projects that should be retained over a defined period of time? If yes, please list, identify the location of each, and include the retention period.
10. List important historical/reference documents, if any, in your possession.
11. What are the most common vocabulary words, acronyms and terms used in this role?
12. Is there other information not requested on this form that you feel it would be helpful for us to know? If yes, please provide.

TECHNOLOGY

- List all technologies used by this position aside from MS Office programs (i.e., software/applications, database, internal, etc.)
- Complete the description and purpose of information and its source location (i.e., file paths, intranet/internet site, etc.)
- Provide additional comments if needed (i.e., special instructions to obtain/access information, frequency of usage, etc.)

<i>Technology Used</i>	<i>Description & Purpose</i>	<i>Source or File/Storage Location</i>	<i>Notes/Comments</i>
Add cells as needed			

PROCESSES

- List all documented processes used in this current role (i.e., manuals, agency policies, requirements, regulatory procedures, standards, etc.)
- Complete the description and purpose of information and its source location
- Provide additional comments if needed (i.e., special instructions to obtain/access information, frequency of usage, etc.)

<i>Process Used</i>	<i>Description & Purpose</i>	<i>Source or File/Storage Location</i>	<i>Notes/Comments</i>

PERFORMANCE ENHANCEMENT MEDIUM

- List all performance enhancement mediums relative to the position (i.e., industry newsletters/articles, networking venues, etc.)
- Complete the description and purpose of information and its source location (i.e., online or physical archives of newsletters, etc.)
- Provide additional comments if needed (i.e., special instructions to obtain/access information, frequency of usage, etc.)

<i>Performance Enhancement Medium</i>	<i>Description & Purpose</i>	<i>Source or File/Storage Location</i>	<i>Notes/Comments</i>
Add cells as needed			

RESOURCE TOOLS

- List all resource tools used in the position (i.e., Agency training documents, information binders, compliance/regulatory guides etc.)
- Complete the description and purpose of information and its source location
- Provide additional comments if needed (i.e., special instructions to obtain/access information, frequency of usage, etc.)

<i>Resource Tool</i>	<i>Description & Purpose</i>	<i>Source or File/Storage Location</i>	<i>Notes/Comments</i>
Add cells as needed			

Legacy Binders



How to create a Legacy Binder

Section Cover sheet Template

Section (add section # and the name of the project)

File located at: (add the location of the files)

Primary Resources (identify people who worked or helped to work on this project)

Project Description (add a concise explanation of the: what, who, why, and how of the project. A bit of the backstory may also be useful)

What is Left To Do (a list of what still need to be done on the project. It should also include how to perform ongoing critical tasks that must continue)

This page is a cover sheet for the detailed documentation that will make up the body of the legacy binder. Behind this cover sheet will be the primary documents and the documents needed to complete what is left to do.

Section 2: Quality Improvement Plan

W:\Planning\PWD\Joan Ascheim\AscheimJ (execdfsdp-users1)\quality improvement plan

Primary Resource: Joan Ascheim

Background:

The DPH Quality Plan serves as an evolving guidance document that describes how DPH will establish, manage, deploy and monitor quality throughout the organization. The Quality Plan identifies the processes and activities that will be put into place to ensure that quality services are consistently provided. The plan also describes the overall management approach to quality planning and improvement and the performance management framework employed by DPH. The Quality Plan outlines a performance management plan aligned with the DPH mission and vision, its operation Strategic Plan and its State Health Improvement Plan. Additionally, this document provides an annual work plan which includes activities that both build our infrastructure of quality and move us toward being a performance based organization.

To Do:

- Assist with updates/edits to Quality Plan
- Review and assist in updates of work plans

Updates by Joan Ascheim March 24, 2017

- 2017 Annual Work Plan Added

To Do:

- Update Quality Plan at some point in the future:
 - Major update - PM assessment/Culture of Quality Assessment – NACCHO tool
 - Minor updates (accreditation p. 2, tutorial description p. 15, training section updates, strategic map page 21, PM Model p. 23, annual work plan p. 33, QI inventory p. 39)

