



mejorando group

FINAL REPORT

August 6, 2006

Central North Carolina
Public Health Incubator:
*Strategic Public Health
Workforce Planning and
Development*

Submitted By:

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August 6, 2006

Dorothy Cilenti
Health Director
Alamance County Health Department
319 N. Graham-Hopedale Rd
Burlington, North Carolina

Re: Workforce Plan-*Final Report*

Dear Dorothy:

The Mejorando Group is pleased to provide a systematic and comprehensive Workforce Plan to the Central North Carolina Public Health Incubator/Region V of the North Carolina Health Directors Association. This final report includes recommendations that when implemented, will help disrupt the status quo, and augment current efforts at recruiting, retaining and developing agency talent.

The focus of the agencies, combined with the current trend of people departing their organizations, indicated that a comprehensive method to replace talent throughout those organizations was needed: the creation of a Workforce Plan. The Workforce Plan goes beyond an approach that focuses on simply replacing individuals and engages in broad, integrated workforce planning and management efforts that focus on strengthening both current and future organizational capacity.

Identifying and developing people for key roles are basic to future organizational success. To make certain that success is continued, organizational leaders:

- Need the excellent performance in their organization preserved, if not enhanced.
- Need important leadership positions identified
- Want to strengthen individual advancement.
- Want to have the right leaders prepared for the right positions at the needed time.

I am extremely pleased with the collaboration we experienced on this project. I recognize that a project of this magnitude can be disruptive for internal staff that is focused on their primary roles and responsibilities. I appreciate the sharing of yours,

the other Directors and each of your respective staff members' time, thoughts and expertise.

I welcome the opportunity to continue our partnership, providing assistance with implementation if needed. If you have any questions or need more information, please feel welcome to contact me at 925-518-0187 or via e-mail at patrick@gettingbetterallthetime.com.

Sincerely,

A handwritten signature in black ink, appearing to read "Patrick Ibarra". The signature is fluid and cursive, with the first name "Patrick" being more prominent than the last name "Ibarra".

Patrick Ibarra
Co-Founder and Partner

PROJECT SCOPE

The **Project Scope** is divided into two segments, the **Background** which describes both the factors prompting the project and the desires by the agencies on what constitutes a successful project and second, the **Approach**, which outlines the methods used for information gathering and analysis in completing the project.

Background

The Central North Carolina Public Health Partnership is comprised of nine-member County health departments from Region V that serve approximately 1.8 million residents. These counties are listed as follows, with population estimates from 2004 for each county in parentheses:

1. Alamance (138,462)
2. Caswell (23,673)
3. Chatham (57,023)
4. Durham (239,733)
5. Guilford (438,795)
6. Orange (117,515)
7. Person (36,941)
8. Rockingham (92,517)
9. Wake (719,520)

Role of Public Health Services

Public Health agencies serve communities and individuals within them by providing an array of essential public health services. A defined set of Ten Essential Public Health Services was adopted in 1994 by the Public Health Functions Steering Committee, a group of leading public health organizations. Today, this nationally recognized list serves as a common framework for public health training, communications, and performance measurement. Many of these essential services are provided by the agencies within this report and include:

1. Monitor health status to identify community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provisions of health care when otherwise unavailable.

8. **Assure a competent public health and personal care workforce.**
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

With changing demographics and opportunities, the American workforce is rapidly approaching a labor and leadership crisis generated by increasing numbers of retirement-eligible older workers and a shrinking proportion of younger workers. The health care industry is no exception. **According to the Institute for Public Health's Center for Public Health Preparedness, "consistent with national trends, nearly 50% of the public health workforce in North Carolina is 45 years of age and older."** A well trained, adequately staffed public health workforce at the local level is essential to ensure that the public health system is able to protect and improve the health of the community and effectively respond to potential threats, emerging infectious diseases, and other public health concerns.

To curb this growing crisis, the public health leaders of the agencies within Region V, are seeking to improve public health workforce capacity by:

- Facilitating the development of new skills and competencies of the existing workforce
- Expanding training on new challenges in public health
- Effectively preparing and recruiting students and professionals from other disciplines and countries to enter and remain in the practice of public health
- Examining the working environment of our public health agencies to determine if there are changes that could be made to bolster retention and recruitment
- Identifying, sharing and coordinating recruitment and retention efforts in order to reduce duplication and maximize effectiveness.
- Increasing efficiency and efficacy of public health practice by recruiting bilingual and multicultural health care professionals.

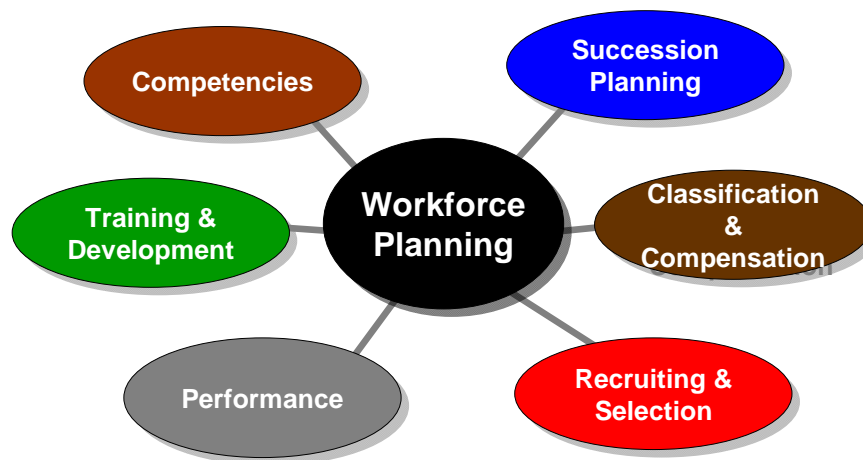
Using state-provided funds, Region V contracted with the Mejorando Group to facilitate the development of a strategic workforce plan that specifically captures the issues confronting agencies within the region with respect to workforce planning, and more importantly, offers recommendations to implement various strategies and tactics as part of a larger workforce plan.

Workforce Planning: What is it and What are the Issues prompting its adoption

The need for careful, long-term planning is more important than ever. Workforce planning and development are important and central tools for any organization, and is defined as a strategy and set of procedures by which the organization's future personnel needs are assessed and addressed in order to meet organizational objectives.

Additionally, workforce planning is the strategic alignment of an organization's human capital with its business direction. It is a *methodical* process of analyzing the current workforce, determining future workforce needs, identifying the gap between the present and future, and implementing solutions so the organization can accomplish its mission, goals, and objectives.

Factors of Workforce Planning



All of these six factors are evaluated with respect to how the agencies are currently utilizing each to help their workforce planning efforts. Recommendations are also included to help disrupt the status quo and improve each activity independently and inter-dependently. It is only if all six factors are in alignment that benefits from workforce planning will be realized.

It is imperative to recognize that the process of establishing systematic workforce planning is the equivalent of making a long-term culture change. It can be a major shift in an organization where decision-makers have been accustomed to filling one vacancy at a time. Workforce planning requires commitment to a longer-term strategic view of talent needs.

Current Issues prompting adoption of Workforce Planning

The Federal Bureau of Labor Statistics estimates that by the year 2010, there will be a 10 million worker shortfall. In other words, there will be 10 million more jobs than qualified employees. Demographic and economic projections suggest that the shortage of workers will start soon and grow significantly, but the Employment Policy Foundation estimates that 80 percent of the impending labor shortage will involve skills, not numbers of workers potentially available.

Another trend reported by the Bureau of Labor Statistics concerns the Ten *Occupations* with the Highest Growth Rate, from 1998 to 2008, in which Registered Nurses are included and expected to grow 22%. The Ten Fastest Growing Occupations, 1998 – 2008 are illustrated in the table below:

Occupation	Employment 1998 (thousands)	Employment 2008 (thousands)	Employment Increase (thousands)	Percent Change
Personal Care and Home Health Aids	746	1,179	433	58
Medical Assistants	252	398	146	58
Social and Human Service Assistants	268	410	141	53
Physician Assistants	66	98	32	48

Consequently, the fields and professions which make up a large portion of public health care agencies are growing at an unprecedented rate and this factor combined with the coming skills shortage create a difficult situation. Paradoxically, the ability to recruit and retain these same individuals has becoming increasingly more difficult. Overall, these factors have created the current situation that likely will continue into the foreseeable future: shortage of skills simultaneously along with the rising demand for the skills.

A complex set of variables shapes the nature, timing, and extent of these deficits. Many of these same variables that are relevant nation-wide in all types of industries were also found in the analysis of the results from the e-questionnaire and focus groups that were part of the information gathering segment for this project. The following variables are part of the overall trend nationwide:

- Productivity gains reduce the demand for labor. The use of information technology is paramount in this area.
- Immigration policies, including the number of work visas allowed for skilled workers, will affect the labor pool.
- Education – not just the number of workers but what they can actually do – factors heavily in almost every new job created. The technological demands of even “unskilled” entry-level jobs are increasing and professional and technical fields are already experiencing labor shortages.
- Workforce participation rates will also affect the labor pool. Currently only 20% of graduates from schools of public health go to work in governmental public health.
- The Bureau of Labor Statistics (BLS) reports that there will be an increase in demand of more than 20% from the private sector for the very graduates

(biological sciences, epidemiology, etc.) that will be the focus of the governmental recruitment efforts.

Additional factors impacting the specific county health departments in this project are examined later in this report in the Themes segment.

Approach

This section provides a synopsis of the approach utilized to capture current practices and operational information necessary to establish the workforce planning process.

In order to assess the breadth and depth of factors currently (and in the near future) impacting the workforce of each agency and create a systematic Workforce Plan that encompasses those factors, several activities were involved to assess and analyze current and future trends.

Step One: Review of external and internal factors

Similar to an environmental scan and a SWOT (Strengths, Weaknesses, Opportunities and Threats) analysis, several external and internal factors were examined to determine their individual and collective impact on the operations of county health departments both at the present and in the future; in particular on the talent needed to manage and operate the organization. These factors include: 1) External: Political, Social, Legal, Economic, Technological, and Environmental; and 2) Internal: Mission, Culture, Size, and Operations. Determining the influence of these factors on health services, and thus, the types of skills needed, provided a valuable benchmark.

Three sources of information were critical in completing this task, the perception held by key stakeholders, status/description of current workforce, and the influence of present operations that may or may not be assisting agencies in their efforts at workforce planning. Several methods were used to obtain information including:

- ***E-Questionnaire:*** An electronic questionnaire comprised of sixteen open-ended questions was sent to those employees considered as part of management for each of the nine agencies. 67 of the 90 employees (74% response rate) who received it completed the survey, indicating a strong level of interest in this subject. The purpose of the questionnaire was to gather perceptions about the issues confronting their agency, with respect to operations and the role of the workforce in positively impacting those issues. Additionally, it was to determine how agencies were helping or hindering efforts to build and sustain a team of competent and dedicated professionals.
- ***Document Analysis*** Unobtrusive measures like the following provided a relatively objective view of agency operations and potential issues. Some agencies had much of this information already available for review, while others did not. Records were obtained and reviewed, including:

1. Agency Budget for 2005-2006
 2. Classification Plan
 3. Compensation Plan
 4. Collective Bargaining Agreements (i.e. Labor Union contracts) and Memorandums of Understanding (Interpreter Services, Temporary Employees etc.)
 5. Description of promotional processes
 6. Description of retirement system agency employees are under: minimum number of years of service and minimum age to retire.
 7. Exit Interview summary information
 8. Human Resources Monthly Management Reports
 9. Human Resources Department Strategic Plan
 10. List of job titles/positions most difficult to fill/recruit for
 11. List of names and email address for management team (for e-questionnaire)
 12. Job descriptions for positions within Health Department
 13. Organization Chart
 14. Performance Appraisal (blank form)
 15. Results from Employee Opinion Surveys
 16. Summary of training provided for 2005
 17. Workforce Demographics provided in various formats:
 - a. List of employees who left employment in 2003, 2004, & 2005 categorized by position and years of service.
 - b. List of current employees by job classification, years of service and age.
 - c. List of supervisory employees with job title, years of service, age and number of employees supervised.
 - d. List of promotions made in 2003, 2004, and 2005: person's name, previous job title and job title of promotion.
 - e. Demographic Analysis table
 - f. Years in the retirement system by race , ethnicity, gender of each county's workforce
 - g. Number and percentage of employees who are bilingual.
- **Staff Focus Groups Summary:** The University of North Carolina at Chapel Hills, School of Public Health's Institute for Public Health (NCIPH) conducted a number of focus groups to gather information from staff at all nine agencies regarding issues that affect workforce retention and recruitment. A full report was prepared by the NCIPH and provided to each agency in this project. For purposes of this Report, only highlights from the work completed by the NCIPH were utilized.

Themes which emerged from analyzing the information gathered via the aforementioned steps are included under the Summary section on page 19.

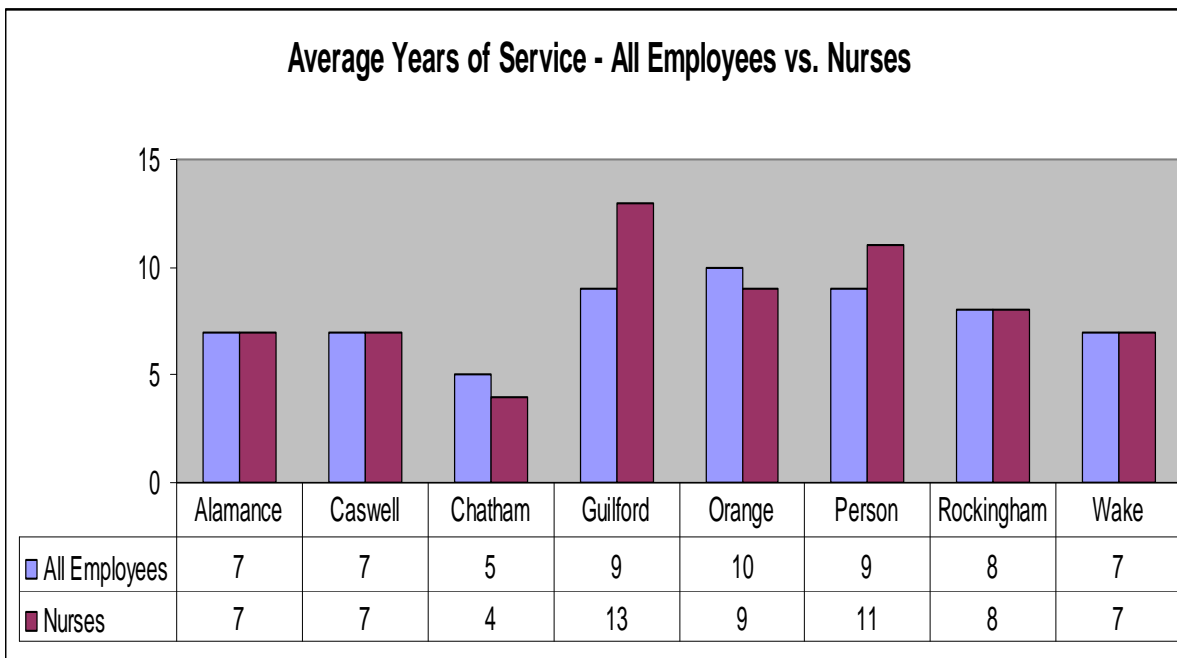
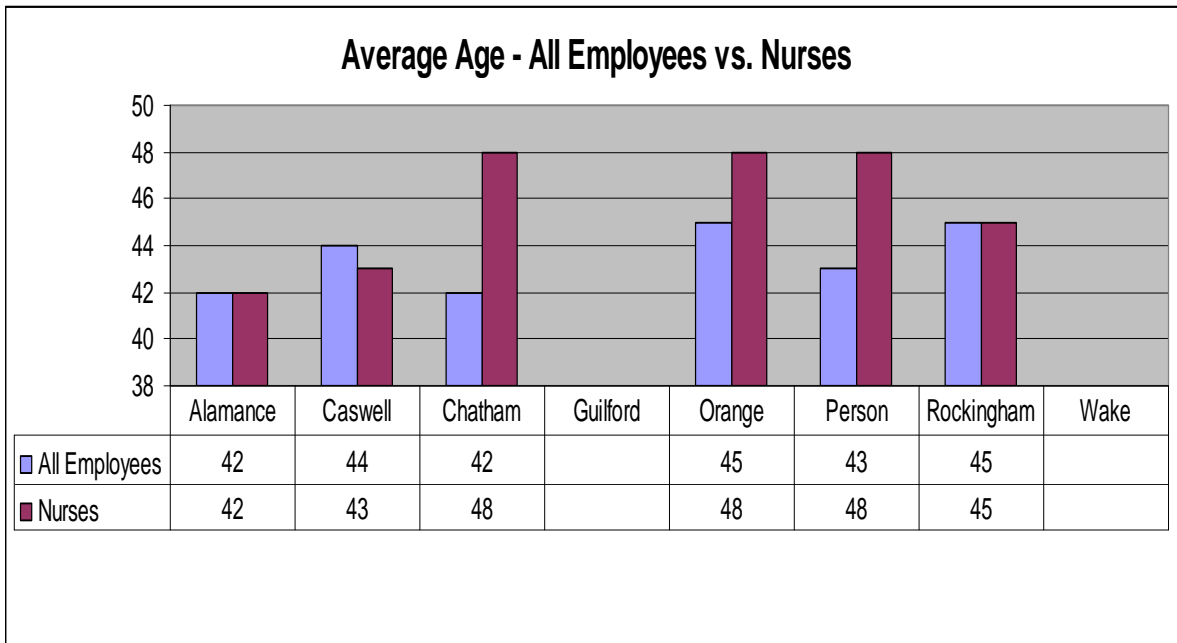
Step Two: Analysis of Workforce Demographics

The themes from Step One were then combined with a risk analysis of workforce demographics for each agency and the entire region. A risk analysis is simply an assessment of what level of risk an organization faces owing to the loss of key people (key people/positions exists at all levels in the organization, not merely at the top).

A number of key workforce demographics were gathered for each agency as well as the entire region and are provided in two formats. The first set of workforce analytics are intended to compare agencies about the average age of their respective workforces and average years of service with that particular agency. This set of analytics also contains particular information about the nursing population within each agency as it was the profession/occupation identified overwhelmingly as the toughest position to recruit for among all the agencies.

Not surprisingly, based on nation-wide trends there is a strong similarity among all agencies with respect to the average age for both their entire workforce and those serving as nurses. However, while the average age for the entire region is 43 and for all agencies is between 42 and 45 years of age, the average age for years of service is only 9 years, 8 for nurses. This would seem to indicate that newly hired employees are coming from primarily the mid-career segment of the labor force population. This is key information going forward with regards to expanding and improving recruitment efforts at this particular market, which is examined later in this report. Average age for nurses is 45 with the national average being 49 years of age.

County	<u>All Employees</u>		<u>Nurses</u>		Number of Nurses
	Average Age	Average Years of Service with current agency	Average Age	Average Years of Service with current agency	
Alamance	42	7	42	7	21
Caswell	44	7	43	7	16
Chatham	42	5	48	4	10
Durham					
Guilford		9		13	133
Orange	45	10	48	9	19
Person	43	9	48	11	13
Rockingham	45	8	45	8	19
Wake		7		7	152
Region Average	43	9	45	8	



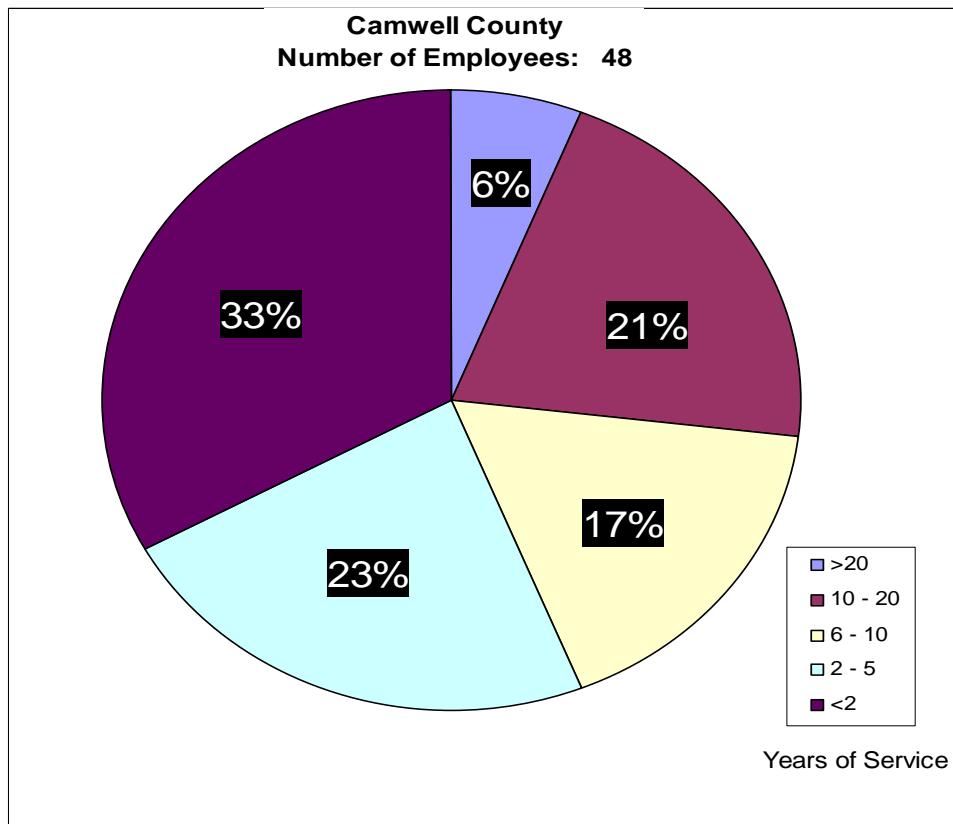
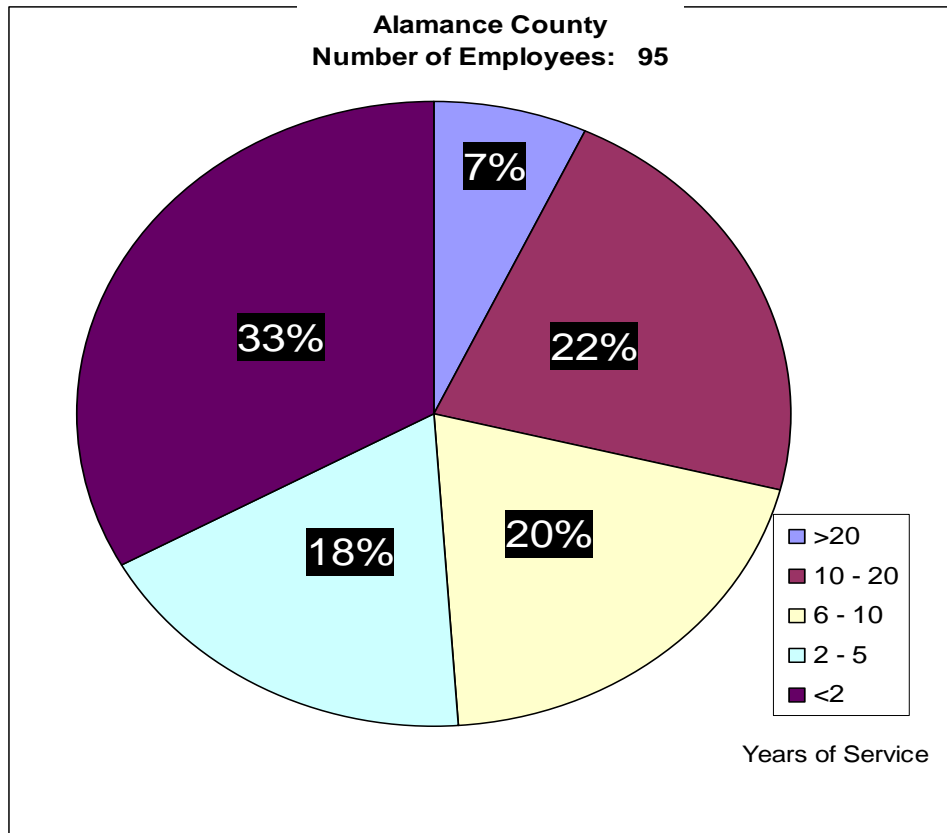
The following workforce analytics are concerned with the distribution of the workforce according to years of service for each agency. This type of information is important in understanding with some precision, the tenure of the workforce. As evidenced by the following table each agency has a workforce in which 1/3 to 1/2 of the employees have been with their agency less than 5 years. This would seem to indicate that a steady amount of turnover has been present within each agency, with employees either retiring or leaving for employment elsewhere. Based on nationwide and regional information, this trend will most likely continue.

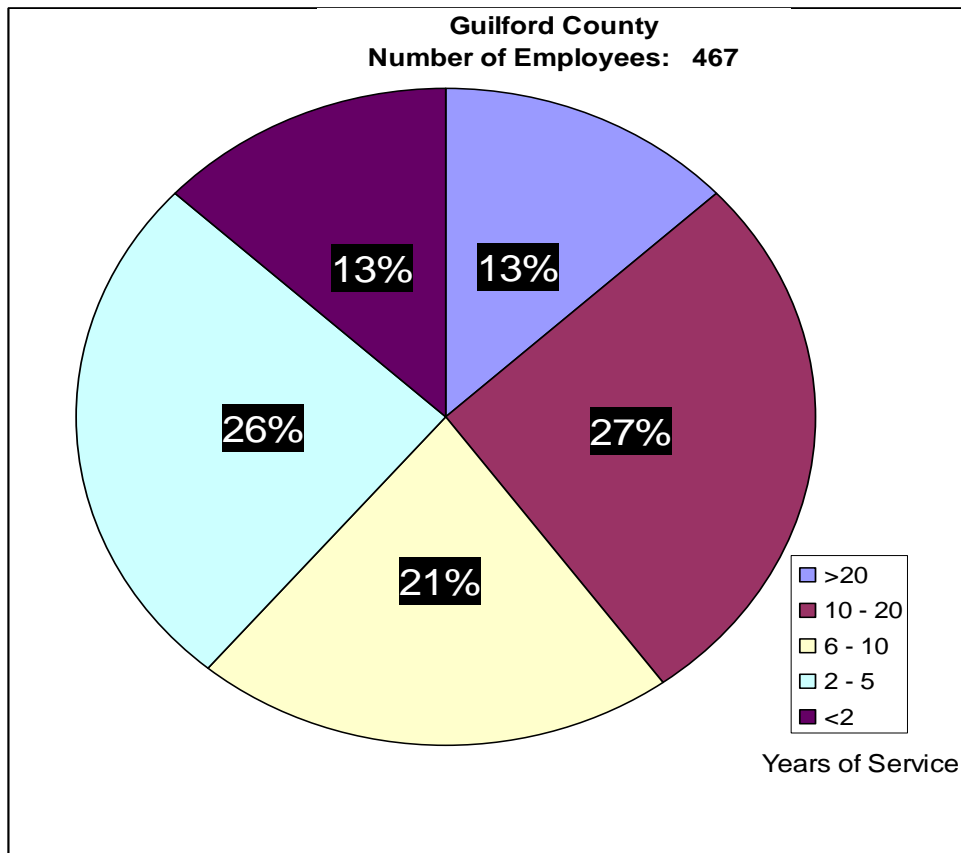
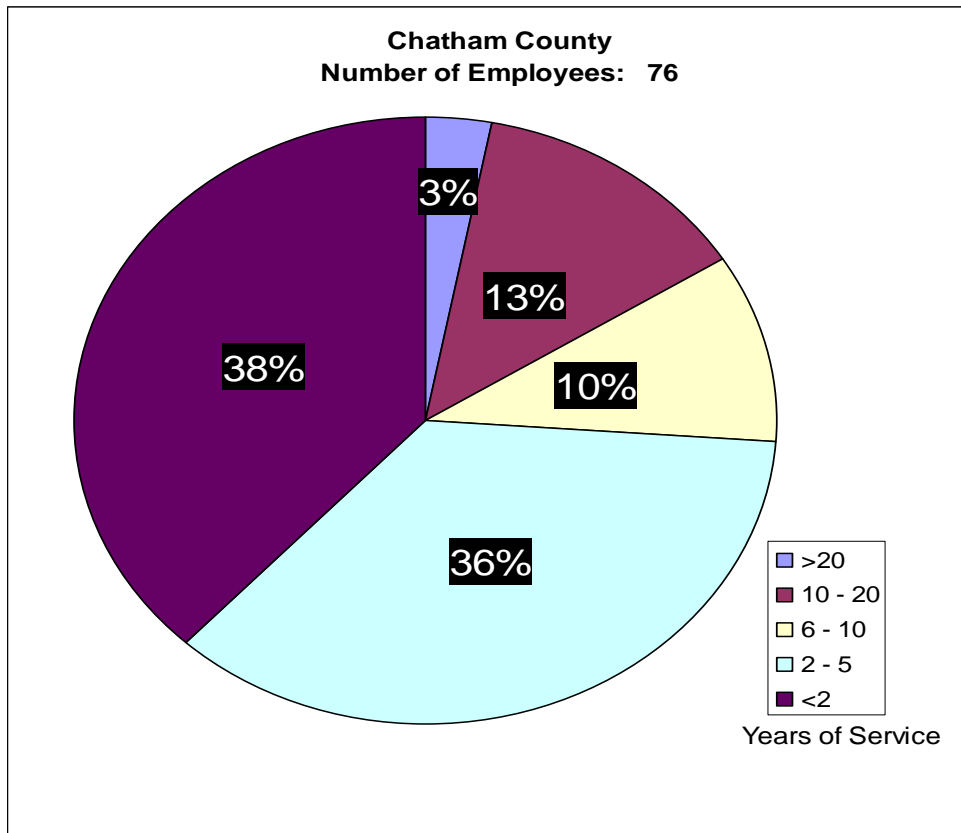
Turnover can sap “bench strength.” *Avoidable turnover* is initiated by employees. It is a loss resulting from resignation as individuals leave the organization, typically moving to positions in other organizations. Although turnover of any kind is costly because the organization must find and train replacements, avoidable turnover is worse because it could be avoided if the organization could find some way to retain the employees.

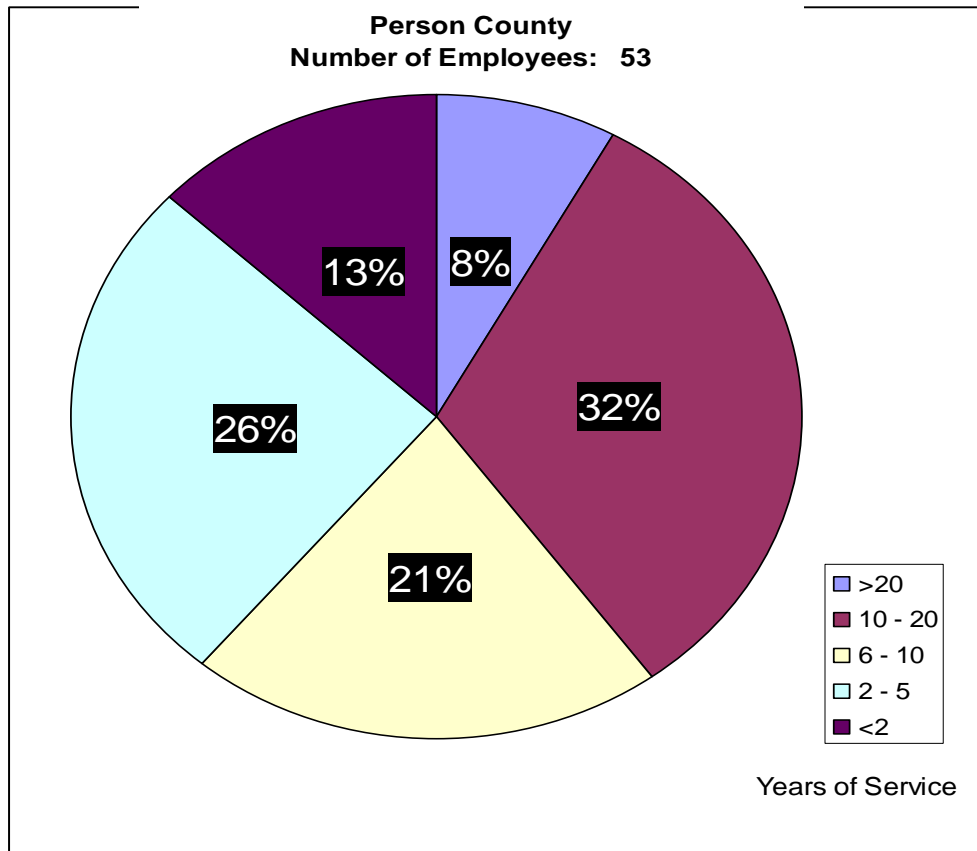
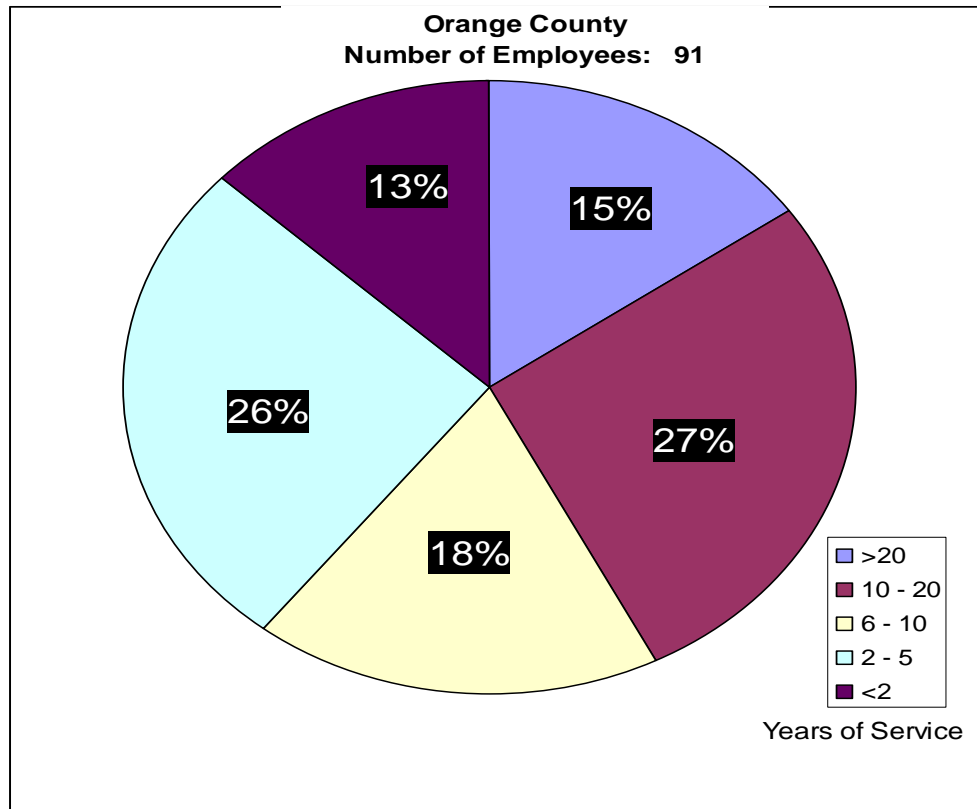
Arguably, less than 5 years of service within an agency would constitute a less seasoned, i.e., experienced, workforce. Such a workforce can struggle with translating lessons learned from previous situations within their agency to solving today and tomorrow’s challenges. In other words, they can lack institutional knowledge in how “things get done.” The upside of this is that they are also less bound to the past and may exercise more creativity in addressing new challenges. They may very well be more likely to disrupt the all-too-common refrain of “we’ve always done it that way” approach and instead, try a new approach.

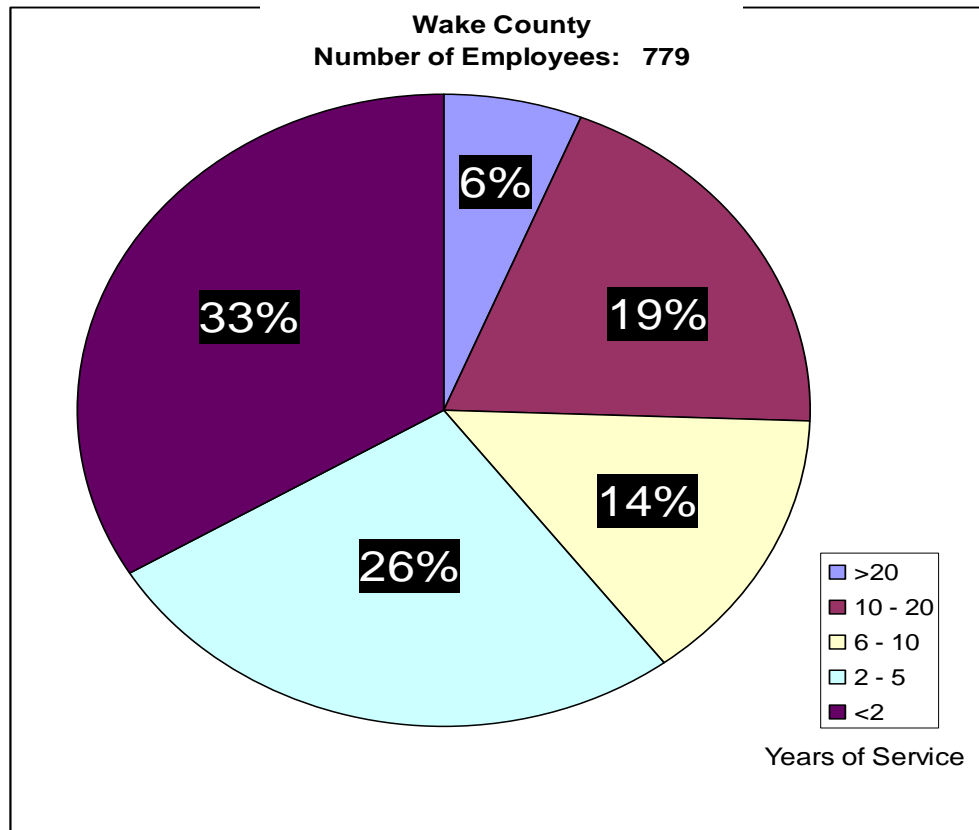
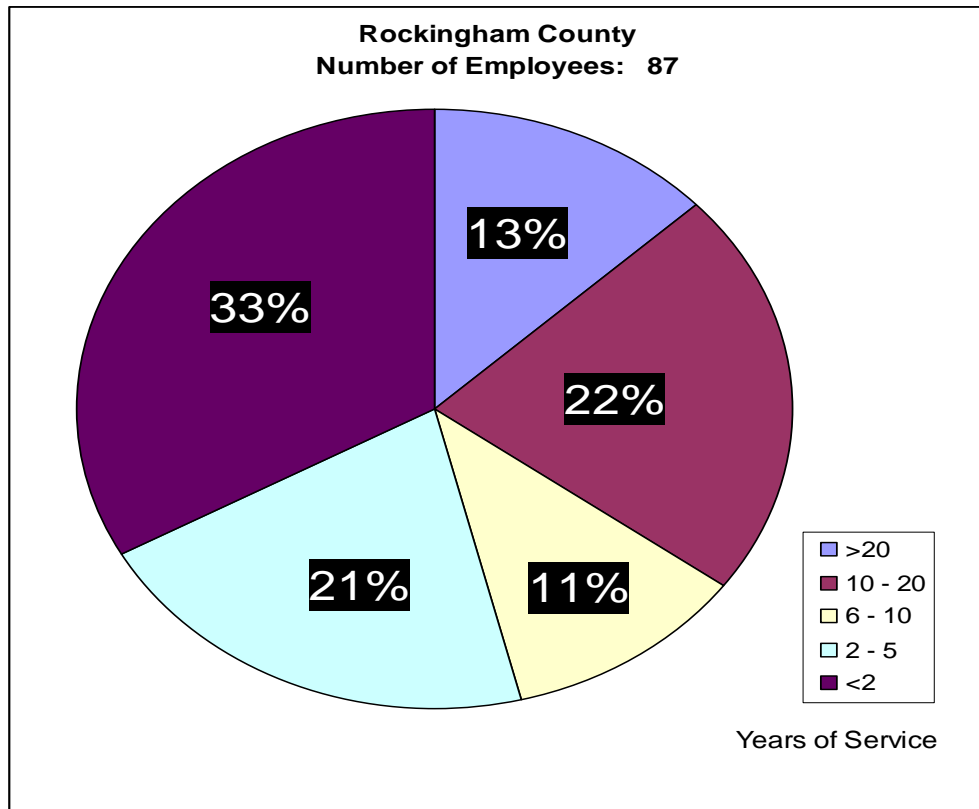
All Agencies – Years of Service with Current Agency

<u>Agency</u>	<u>Number of Employees</u>	<u>>20</u>	<u>10 - 20</u>	<u>6 - 10</u>	<u>2 - 5</u>	<u><2</u>
Alamance	95	7%	22%	20%	18%	33%
Caswell	48	6%	21%	17%	23%	33%
Chatham	76	3%	13%	10%	36%	38%
Durham	206					
Guilford	467	13%	27%	21%	26%	13%
Orange	91	15%	27%	18%	26%	13%
Person	53	8%	32%	21%	26%	13%
Rockingham	87	13%	22%	11%	21%	33%
Wake	779	6%	19%	14%	26%	33%
Average	211	9%	23%	16%	25%	26%









Step 3 Evaluate the six factors that comprise Workforce Planning: 1) Recruitment and Selection; 2) Performance Management/Appraisal; 3) Training and Development; 4) Competencies; 5) Classification and Compensation; and 6) Succession Planning.

1. *Recruitment and Selection* – Based on the focus group research conducted by NCIPH, employees possess very strong feelings about the benefits of working in a county health department, namely the sense of autonomy, variety of skills, working with the public and positive working environment. However, in reviewing all agencies web sites and reading job announcements for positions within the health department, there is no mention of any of these aspects as a way to entice candidates to apply. In fact, the job announcement is simply a job description, which while important can have little appeal to those candidates agencies want to hire and help improve operations. A critical factor related to recruiting is portraying a positive image of the employer. How the “employment brand” of the organization is viewed by both employees and outsiders is crucial to attracting applicants and retaining employees, who also may describe the organization in positive or negative terms to others.

The recruiting image of an industry and an employer can significantly affect whether individuals ever consider an organization and submit applications. Research indicates that recruiting should be seen as part of organizational marketing efforts and linked to the overall image and reputation of the organization and its industry. While County Human Resource Departments play a crucial role in helping shape the recruiting image for all county departments, Health Departments must be more adamant that their recruitments reflect changing workforce demographics and appeal to a broader cross-section of potential applicants.

The methods by which agencies source candidates (i.e. advertise and market positions) were not identified, but if the web posting is an indicator it would seem the primary methods are the agency’s web site and local newspapers.

2. *Performance Management/Appraisal* – There are several litmus tests to gauge how well an agency’s performance management system is working. First, the performance management system must motivate the best performers. Of course, performance management is for all employees, and general excellence in performance means greater productivity and increased effectiveness. But it’s especially important that the system work well for the employees who contribute the most.

The system must also accurately reflect organizational-business objectives. Employees should understand that their rewards derive from doing what the agency values most. Employees must feel that their work matters toward business performance.

The performance system must also be transparent and understandable, especially to those at lower levels in the organization. If employees say, "I don't really understand how things work; I just get my automatic once-a-year raise," then they are not being influenced or motivated by the system. They must understand the performance management process to participate in it. In particular, the system must be explicit about the baseline of performance that everyone must meet, and the consequences for failing to meet it. Finally, employees must understand and fully appreciate the value of their total reward packages.

In review of agency performance management processes, there is a large discrepancy with respect to the type of instrument and processes used. In general, most of the agency instruments focus on handling tasks with some including goals as part of pay for performance systems.

3. *Training and Development* - current practice by most agencies is to invest a large majority of agency dollars targeted on enhancing employees' technical capabilities with little focused on supervisory and management skill development. As a point of reference, this is typical of government organizations. With respect to development, it was difficult to ascertain the breadth and frequency of development activities. However, based on experience with other government organizations, it is most likely happening for high-performing employees on a case by case basis, but it is not a systematic and comprehensive approach. An existing constraint is the realization that budgetary funds for training and other employee development purposes can be limited.
4. *Competencies* - In reviewing agency job descriptions, almost all focused exclusively on technical knowledge and the application of technical skills, with very little mention of how work should be accomplished. Competencies are about describing "how" employees are to fulfill their responsibilities; demonstration of the combination of skills, knowledge, abilities and *behaviors* critical to effective performance. The Council on Linkages between Academia and Public Health Practice has adopted a series of core public health competencies.
5. *Classification and Compensation* - Most agencies operate from a traditional Pay and Classification Plan that list pay grades accompanied by a step-pay system. Process to move up to the next step was primarily merit based. When pay increases are viewed by employees as either automatic or semi-automatic, it communicates a clear message that performance is not what is valued, but showing up for work is. In other words, it supports the human behavior practice of "what gets measured and rewarded gets done." There seemed to be no regular assessment of pay equity and salary costs that would evaluate the effectiveness of the compensation program, as well as the internal alignment to classification and market competitiveness. While some

County Human Resource Departments do conduct market studies regarding compensation for various positions, a concentrated effort of all positions within each Health Department should be completed in the near future.

6. *Succession Planning*: Efforts seemed inconsistent by agencies in executing a comprehensive succession planning process which identifies key positions/at risk positions, places those employees in a process that includes participation in a 360-degree assessment, preparation of an individual training and development plan and the implementation of that plan. As a point of clarification, comprehensive succession planning is not another name for entitlement. It is about increasing the competitiveness of internal employees but not making any sort of guarantee that any particular has been "handpicked" as a successor.

Summary of Themes

Many of the issues confronting the Health Departments are very similar and thus, the recommendations will be similar as well. This occurrence actually allows for more regional approaches to positively impacting the issues by combining resources to do so. There are some natural economies of scale in that regard, too. That being the case, implementing the recommendations included in this Report will not *require* agencies to collaborate, so if an agency chooses to implement one or more on their own, they will be able to do so.

Several themes emerged from completion of Steps 1 through 3 that indicate current trends will continue:

- Citizen/customer expectations for high-quality public services.
- Impacts resulting from increased bi-lingual users of public health services.
- Pressure for agencies to offer a wide-range of services while simultaneously improving current service delivery with limited budgets.
- Public Health workforce trends.
- Pace of technological change will accelerate.
- Competition from other providers (some services health departments provide are also provided by private sector companies, some are not).
- Agency budgets will be sensitive to the natural ebb and flow of economic cycles.
- Retirements and attrition for all agencies throughout all departments and at all levels.
- One-third to one-half of employees have been employed with their respective agencies less than 5 years.
- Recruitment practices will be impacted by changing workforce demographics and local market conditions.
- Nursing shortage.
- Public stigma about role of county health departments will hinder both recruiting efforts and securing additional funding

- Job postings do not emphasize those aspects of public health department work that existing employees find most rewarding.
- Sourcing strategies for applicants are through agency web sites and local newspapers.
- A majority of training focuses on improving individual employee's technical capabilities.
- Compensation systems are not entirely linked to performance.
- Current classification and compensation plans are seen as impediments to recruiting candidates in the existing marketplace (i.e. salary limitations, flex time arrangements not available, etc.)
- Competencies are not present but instead a heavy focus on tasks.
- Succession planning efforts lack cohesiveness among those factors critical to effective succession planning: selecting candidates for at risk positions and placing them in a systematic process to raise their skill levels.
- Some of the smaller agencies and departments are relatively flat and do not provide many opportunities for advancement/promotion.
- Demands asserted by existing workforce with respect to similar issues of possible new hires – tele-commute, flexible work hours, availability of funds for training, clear career paths, etc.
- Smaller agencies will be “training ground” for larger agencies with respect to recruiting talent.

Overall, there's a movement towards expanding the current role of many of the agencies and at the same time expecting that each agency will be able to serve a larger, more diverse population with current staffing and no additional funding. Factor in the struggles to recruit and retain top talent and consequently, a formidable situation exists that necessitates comprehensive and systematic workforce planning.

RECOMMENDATIONS

Initially, the intent was to provide a separate workforce plan for each agency, however upon review of the information gathered about issues and challenges confronting each agency there were sufficient commonalities amongst all agencies to prepare one workforce plan for the entire region. The recommendations, however, do not necessitate a regional approach in order to succeed. There are economies of scale in collaborative efforts but that should not preclude any agency from embracing particular recommendations. In fact, agencies are encouraged to explore the viability of the entire set of recommendations and pursue the implementation of those they believe will have the most beneficial impact for their particular jurisdiction.

Based on our analysis, experience, and knowledge of how other public and private sector organizations have remedied similar problems, we propose a number of specific and strategic recommendations.

As part of preparing the series of recommendations, the findings from a particular research report were integrated. This research report, from the Center for Health Workforce Studies in the field of the aging of the workforce, identified a number of trends that have surfaced. These trends are:

- *Aging* The average age of employees will continue to rise, and the workforce will become more multigenerational. Proportionately, mature workers are the fastest-growing segment, and large employers can expect to double their percentage of workers over 55 during the next five to ten years.
- *More ethnic diversity.* By demographic standards, the racial and ethnic mix is changing very rapidly, with minorities now accounting for one-third of younger workers.
- *Increasing lifestyle/life-stage variety.* People are no longer “acting their age.” Their life plans are no longer linear and predictable. They differ wildly in how they integrate work and other pursuits into their lives.
- *Tightening labor markets.* As the rate of labor force growth plummets to 2 to 3 percent per decade, labor markets will tighten and competition for talented people will intensify.
- *Shortage of skills and experience.* As the baby boom generation reaches retirement age, organizations face a potentially debilitating brain drain of skills and experience.
- *Shortage of workers.* Overall demand for workers is already beginning to exceed supply. The gap is projected to grow to millions, perhaps tens of millions, of workers, with potentially profound effects on economic output and standard of living.
- *Shortages of educated candidates.* Despite continuing progress in average educational achievement, colleges will graduate too few candidates to fill the technical, information-intensive, judgment-intensive jobs five years from now.
- *Pressure on training and development.* Employers must not only encourage employees’ continuing education but also provide that education directly to maintain needed skill levels.
- *Tension around HR policies and practices.* The whole range of management practices – compensation, benefits, and especially work arrangements – must appeal to the new workforce and accommodate the expanding variety of workers’ needs and preferences.
- *Strain on organizational coherence.* As the workforce diversifies and disperses – adopting flexible schedule, telecommute, and other technology-enable arrangements – leaders must find new ways to cultivate and nourish organizational culture and identity.

The healthcare industry is facing challenges that are unique as compared to other industries. In their article “Confronting the Impending Public Health Workforce Crisis in America: Perspective from Academia and Public Health Practice” from the Florida Public Health Review (2004), authors and doctors Mahan and Malecki stated “it

seems obvious that the rapidly increasing complexity of the scientific background needed to address modern-day and future public health threats effectively will force us to recruit and retain people of much higher educational background than in the past, even (or perhaps, especially) at the entry level. The emerging issues will require responses that are substantially different the way public health leaders, practitioners, and academicians have approached them in the past.”

The observation made by the authors of that article is supported by many of the comments which surfaced in the information gathering stage of this report: a public expecting more from their public health agencies while not necessarily supporting additional funding. Furthermore, the growth of health care professions, the continuing nursing shortage, and the impact of other significant trends creates a situation in which “doing more of the same” will not succeed and instead doing things different and doing different things must be embraced. While risk-taking is not often encouraged in the business of government, new ways of problem-solving must be utilized if better outcomes are to be achieved.

Several aspects to improve workforce planning efforts are presented in the following pages. While there might be a tendency to grab onto some easy-to-implement tactics and essentially “cherry-pick” that inclination is discouraged. Instead, an investment of time and effort to consider the various strategies presented here should be made and discussed by each agency’s executive team as a way to establish the appropriate infrastructure by which tactics will be subsequently used. Government agencies tend to rely solely on tactics, or “levers” to try to immediately impact a situation. While the good intentions are unquestionably evident, these efforts are rarely sustainable and often accomplish little if any meaningful change: the problems continue unabated.

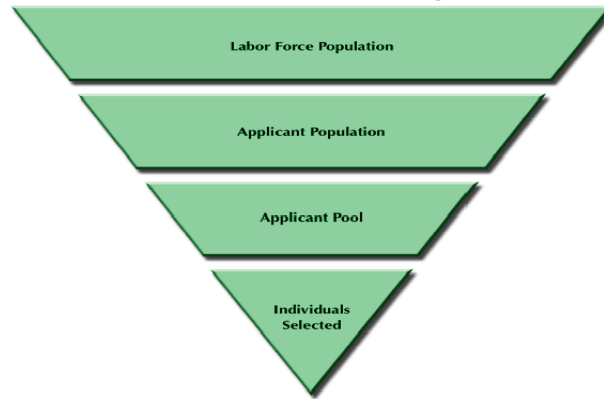
Contemplating the following strategies may very well require a paradigm shift among some key stakeholders; change is often uncomfortable even for seasoned, experienced professionals. Benefits from systematic and some might say unconventional workforce planning will be realized when well-designed strategies are adopted and focused tactics are executed, as outlined in the following pages of recommendations.

SIX FACTORS OF WORKFORCE PLANNING

1. Recruitment and Selection

As the labor market becomes increasingly more competitive and the ability of the nine county health agencies to compete for the best talent stiffens, it requires a deliberate and progressive approach to recruiting. The following diagram illustrates the components involved in recruiting:

Labor Market Components



Labor markets are the external supply pool from which employers attract employees. To understand where recruiting takes place, the sources of employees can be thought of as a funnel, as demonstrated in the graph shown above, in which the broad scope of markets narrows progressively to the point of selection and job offers. It is important for recruiting efforts to address a number of specific issues that affect the agencies in today's labor markets:

- *Labor Force Population*: all individuals who are available for selection if all possible recruitment strategies are used. This large number of potential applicants may be reached using many different recruiting methods – for example, Internet, colleges and universities, word-of-mouth, newspaper ads, etc. Each recruiting method will reach different segments of the labor force population.
- *Applicant Population*: a subset of the labor force population that is available for selection using a particular recruiting approach. At least four recruiting decisions affect reaching the applicant population:
 1. Recruiting method: Advertising medium chosen.
 2. Recruiting message: What is said/written about the job.
 3. Applicant qualifications required: Education level and amount of experience necessary.
 4. Administrative procedures: when recruiting is done, applicant follow-up.
- *Applicant Pool*: all persons who are actually evaluated for selection. Many factors can affect the size of the applicant pool. For example, the reputation of the organization and industry as a place to work, the screening efforts of the organization, and the information available all may affect the applicant population.
- *Individuals Selected*: those persons who are offered and accept a position.

The health care agencies are struggling with a number of the issues relevant to the Labor Market. First, smaller more rural agencies struggle with simply the small

numbers available for their labor force population, while larger more urban agencies struggle to be visible in their typically large areas. Second, the recruiting methods being used are typically agency web sites and possibly local newspapers. Third, the recruiting message is a job announcement that is simply a job description and does not underscore any of the positive aspects of working in county health care. Fourth, while not examined in particular if like most other government organizations, the hiring process is a long, protracted and cumbersome process. Fifth, there is a stigma regarding government work. Finally, the focus on creating a more diverse workplace is not well defined and strategically executed.

Recommendations to address these issues are:

1. Job postings should include description of the many positive features associated with public health careers and work environment and be reflective of the workforce. These messages also help demonstrate a more diverse workplace and aid in recruiting a more diverse workforce.
2. Sourcing candidates/recruiting methods should be expanded to include professional organization/chapters, labor unions, colleges and universities, non-profit organizations, state employment offices, and web sites targeted at the applicant populations.
3. Collaborate with agency and/or county human resource departments to accelerate the hiring process.
4. Work at creating a new public image about the positive impacts the employees make while working in county health care departments. There are several national efforts at doing this now underway.
5. Undertake a concentrated effort at building a more diverse workforce. For example, each county health department should initiate a partnership with www.explorecareers.org which has as a major initiative, workforce diversity related issues targeted at primarily health care professionals. Second, apprenticeships and internships can be designated for promoting diverse workforce goals.

These tactical recommendations should be incorporated into a larger strategy that consists of all three labor markets: Mature Workers, Mid-career workers and Young workers. This three-pronged strategy is discussed in detail beginning on page 27.

2. Performance Management/Appraisal. Performance management must be structured and consistently applied, but also flexible and responsive to the needs and styles of employees and employee segments. Designing performance systems is never easy; changing them can be even harder, if for not other reason than employees are used to the ones they have, like them or not. Based on existing performance management systems within each county that showed little if any regular feedback processes, a heavy focus on task completion to gauge employee performance and practically no linkage between performance and compensation, **it is recommended that a more thorough assessment be conducted of each agency's performance management systems, possibly**

by a cross-functional employee task force. If assembled, the task force should utilize the following to assess the effectiveness of their respective agency's performance management systems and make improvements, as well:

- Individuals receiving continuous, personalized reinforcement and feedback throughout the year. Managers and other feedback providers take the time to monitor assess, and discuss and individual's performance regularly. Employees make the process work by turning feedback into improvements.
 - Financial and non-financial factors determine incentive and rewards. Even in the presence of clear financial indicators, each employee should be measured on a mix of factors, including behaviors that enable others to succeed (e.g., sharing experience).
 - Learning and innovations are rewarded, with recognition. Prominent in the measurement and reward mix must be an individual's learning on behalf of the organization (which implies sharing and acting upon what is learned) and innovating to improve the organization's performance.
 - Judicious risk taking is rewarded. Failure upon taking a considered risk is tolerated (few organizations can bring themselves to reward such failure). The performance management systems should note not just day-to-day productivity or results, but also the often bold, thoughtful, and creative attempts that don't hit their mark.
 - Recognition is public. Agencies should create visible forms of acknowledgment, praise, and award that are held in high regard by employees, and that foster performance. Some forms of recognition are regular, other very ad hoc.
 - The reward system reinforces the organizational values, and vice versa. If the organization claims to place value on learning and innovation, but there are no rewards or recognition for learning or innovation in the performance system, employees quickly see the disconnect. The performance system must "live" the organization's values – and motivate associated behaviors.
3. Training and Development. County Public health agencies are essentially on the "front-lines" trying to effectively deliver services in the face of sometimes unpredictable circumstances. Consequently, they must ensure their employee training programs are carefully designed to cover the core public health competencies. Job training gaps can leave workers unprepared for many public health challenges. Currently, region-wide funds available for training are limited and a large majority of dollars being invested are to enhance employees' technical skills and compliance-related issues. With the challenges coming rather fast and furious, a properly trained and prepared public health workforce is required to address new challenges. Therefore, **it is recommended that while training should continue to raise technical skills, there should be a balance along with pressing community issues and supervision/management skills. All agency employees should, along with his/her immediate supervisor, co-create a robust and practical training and development plan which**

incorporates both technical skill development as well as performance-related development (i.e. supervisory skills, leadership, interpersonal, etc.).

4. Competencies. Competencies are about describing “how” employees are to fulfill their responsibilities; demonstration of the combination of skills, knowledge, abilities and *behaviors* critical to effective performance. **It is recommended that continuing education for core competencies be administered as they help each agency’s workforce maintain its current skills and develop the new knowledge, skills, and abilities necessary to confront the challenges of today and tomorrow’s workplace.** Competencies in the areas such as:
 - Communication
 - Needs Assessment
 - Health Planning
 - Budgeting
 - Application of research findings

5. Classification and Compensation. Presently, most county health departments operate from a traditional Pay and Classification Plan that list pay grades accompanied by a step-pay system. Furthermore, compensation with regard to the lack of market competitiveness of wages hindering the ability to recruit new employees and insufficient funding to reward high performers was overwhelmingly one of the most popular topics expressed by participants in this project. It will be extremely difficult to convince the public at large, and policy makers specifically, to dramatically raise wages throughout all ranks of the public health agencies. However, it might be important to remember that wages/salary is only one segment of the entire compensation package and only piece of the employee arrangement with their employers. There are three aspects of the compensation package: Financial Compensation, Health and Wellness and Time-Off. **It is recommended that agencies consider how the entire compensation package is both being developed/assembled and marketed at prospective applicants to entice them and to existing employees as part of their overall retention strategy (i.e. continuous retention).** While discussions between County Health Directors and senior managers within Human Resources and the County Executive have been held, dialogue should be refreshed with the information from this report shared with these key stakeholders. Concerns for internal equity and compression within the larger county organization aside, county health departments are facing a more severe shortage of qualified personnel than most departments and recruit from applicant pools that are directly competing with private sector employers. That evidence alone should justify a revision to current practices and more towards market competitiveness.

Ideally, agencies would move away from the traditional government approach to compensation which is “if we can’t do for everybody, we don’t do it for anybody” and instead transition to more customized approaches to the segment of the labor

market being targeted. The reality is that what workers' prefer and value with respect to their compensation package evolves over their lifetime, but rarely do the compensation packages reflect those changing values.

6. Succession Planning. There exists the belief in some organizations that succession planning be informal and thus unplanned. However, when that describes an organization's preferred approach, there is a tendency for job incumbents to identify and groom successors who are remarkably like themselves in appearance, background, and values; a type of "bureaucratic kinship."

At the same time, there is another belief that succession planning implies that internal employees are entitled to promotions simply because of job tenure. In fact, succession planning is the direct opposite and when it is systematic, transparent and comprehensive it rewards the meritorious and fosters a high-performance work culture.

As current efforts within agencies seem to be rather fragmented with respect to utilizing a systematic succession planning process, **it is recommended that additional effort be expended to create and institute a comprehensive and systematic succession planning process.** Steps involved in this process would include selecting existing employees to participation in succession planning program activities including a 360-degree process, creation of an individual employee training and development plan, and implementation of said plan. These steps can be accomplished either by agency staff or an external resource, such as our firm which is one of the country's leading experts as it relates to government agency succession planning programs.

LABOR MARKET: MATURE WORKERS

Organizations will need mature workers soon enough – well before the end of this decade in most industries in developed countries. As workforce growth slows and economic conditions improve, older workers as well as the already retired will become a key source of skilled labor.

An organization cannot develop a reputation that will attract the most talented mature workers overnight. Each agency must adjust their policies and practices of hiring and retiring, and must cultivate an environment that clearly welcomes and values mature workers.

The pressure to incorporate mature workers may not be high yet, but the dangers of waiting too long are great. It is recommended that each agency begin now, climb the learning curve, and brand their selves as truly multigenerational. In the short term, each agency will fill the skills gaps and establish their selves as the employer of choice for the multigenerational labor market in the not-so-distant future.

Employees of all ages want meaningful work and responsibility, opportunities to learn, a congenial and respectful workplace, fair pay, and adequate benefits, but to varying degrees. Matures expect the mix, especially such elements as pension accumulation and payout options, to reflect the value of their experience and their retirement preferences.

Based on recent research of what matters most to mature workers:

General elements of employment	Relative weight
Comprehensive retirement package	16
Comprehensive benefits package	14
Work that enables me to learn and grow	13
Work that is personally stimulating	12
Workplace that is enjoyable	11
Flexible work schedule	8
Work that is worthwhile to society	8
10 percent more in compensation	7
Flexible workplace	6
Two weeks' additional paid vacation	5

Three points to remember about mature workers:

- Mature workers want to contribute meaningfully, potentially assuming leadership positions relatively late in their careers and bridging leadership gaps during organizational transitions.
- Like workers of all ages, matures want to continue improving their skills and stretching their talents, but organizations continually overlook them for training and development, with retirement on the horizon. Since turnover tends to be lowest among older employees, the return on the educational investment in matures can be higher – much higher- than on an equivalent investment in younger employees. To expand the contribution of these experienced workers, ask them to serve as trainers, coaches, and mentors.

- Flexible work arrangements, especially flexible schedules, will matter increasingly more the proportion of mature workers increases. Flexibility must be a part of the employment deal both as workers phase into retirement and as retirees return to work.

Consequently, **recommendations that agencies should begin to use which appeal to the Mature Worker labor market are:**

1. Remove the bias from hiring practices that typically are aimed at younger applicants. Age bias can surface in the wording of a simple job advertisement. “High energy” and “fast pace” communicate “youth wanted here,” whereas “experience,” “knowledge,” and “expertise” say “we value maturity.”
2. Recruiting channels such as web listings or newspaper ads may not attract older workers. Instead travel clubs for older adults (like Elderhostel), senior centers and retirement communities can all serve as productive recruiting venues.
3. Review and adjust interviewing practices, including the patterns and preferences of hiring managers. Counsel hiring managers who implicitly favor younger job applicants or feel uncomfortable hiring older subordinates.
4. Build a reputation as an active recruiter and a good employer of mature workers. An organization that publicly values the experience and capabilities of mature workers can safeguard its talent supply.
5. Assess mature workers in flexible retirement. Invite suggestions for how work might be structured, such as on a project basis or work from home, and experiment with such arrangements.
6. Institute procedures for career deceleration (or downshifting), new roles and responsibilities, and flexible work arrangements for mature employees approaching or postponing retirement.
7. Lobby policy makers and legislators directly and through industry associations and policy research organizations to recommend and enact reforms to help recruit and retain mature workers. Specifically at the Federal level lobby for the adoption of the Public Health Preparedness Workforce Development Act of 2005 which not only benefits the mature worker segment but includes provisions to entice prospective employees and retain existing employees of public health agencies at all governmental levels.

LABOR MARKET: MID-CAREER WORKERS

In terms of demographics, life stage, and career stage, midcareer workers are, naturally, in between the extremes of the younger and older cohorts. They are in the middle in terms of education, ethnic diversity, and income.

The following table summarizes midcareer workers’ common sources of frustration.

<i>Crisis Point</i>	<i>Explanation</i>
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<i>Crisis Point</i>	<i>Explanation</i>
Career bottleneck	The baby boom generation is large, and too many people are competing for too few leadership positions in organizations that have been shedding layers of hierarchy. Next to job security, this is one of the biggest concerns of managers in their forties and fifties.
Work/life tension	Midcareer workers are “sandwiched” between commitments to children and parents, often at the same time that their working responsibilities are peaking.
Skills obsolescence	Some struggle to keep up with ways of working and managing in the information economy. Some hope that time and diligence will get them promoted or into better and higher-paying jobs, when what they need most is upgraded skills.
Burnout	People who have been career driven for twenty or more years find themselves stretched and stressed, find their work unexciting or repetitive, and run low on energy and the ability to cope.
Career disappointment	The roles employees play and the impact of their work fail to measure up to their youthful ideas and ambitions.

To reengage and rekindle the careers of midcareer employees, agencies must understand and recognize these crisis points. Management should be concerned with these midcareer crises and figure out how to rekindle the careers of people because your organization needs them- for productivity today and retention tomorrow, when the labor and talent shortage hits.

Every day that an employee is less than fully engaged in the work and goals of the organization, energy and focus and contribution are left on the table – productivity lost and never to be recovered. Relatively straightforward changes – a fresh and challenging assignment, rotation to a different part of the organization, extra or specialized training, an in-house career switch, can quickly turn an unfocused employee into a reenergized one. Such changes benefit more than the employees and their individual productivity. The organization also benefits because the employee is better positioned to share experience and innovate in the in the new role.

The challenge where departments hoard talent rather than circulate it throughout the organization is to rejuvenate careers more purposefully, more systematically, and for more employees. Longer term, agencies will need these workers – and may want some to work past retirement age. Alleviating shortages and preventing a brain drain

are not a matter of enticing just one generation of older workers to continue contributing; rather, working (at least part-time) past retirement age has got to become the norm. So agencies must retain not just the current generation of mature workers, but future generations as well. The most severe period of the worker shortage and brain drain will likely occur when most baby boomers – midcareer workers today – reach their sixties. Organizations cannot endure their retiring on schedule. But to retain midcareer workers tomorrow, you must reengage them today. Otherwise, the vast numbers who are less than satisfied with their employment situations will hang on only until they can retire or jump ship.

Rekindling the careers of midcareer workers is simultaneously a short-term and long-term play. The same career changes and management actions to reenergize employees today also increase their effectiveness, commitment, and loyalty down the road. It's a win-win arrangement: win now with greater productivity and innovation; win later with better retention of employees with important skills and experience. Or a lose-lose, if too many employees remain frustrated in their careers, gradually disengage, and merely count the days until retirement.

Recommendations to reengage and energize midcareer workers are as follows:

1. Hire without bias. As was stressed with respect to mature workers, as well, make sure that recruiting channels, screening methods, and hiring decisions work for attracting midcareer workers. Make sure your agency can “take a chance” on reentrants with the right capability but without a recent rack record. And be prepared to hire people directly into flexible work arrangements, including part-time work.
2. Remove the impediments both procedural and attitudinal, to employee mobility. Educate line managers to recognize the signs that employees need a change, and motivate them to support and encourage employees to seek out fresh assignments. Set targets for employee migrations – among organizational divisions, disciplines, and roles (including into and out of management). Track performance against these goals.
3. Get systematic about knowledge and experience sharing. Methods may include mentoring, training, best-practice sharing, “workout”-style business improvement projects, and information systems for knowledge management. Keep in mind that the most thorough sharing occurs when people work together in person.
4. Incorporate new hires individually. Midcareer hires, especially those reentering the workforce or changing careers, may benefit from training and incorporation activities different from what younger hires undertake. Find ways to put the new hire's relevant experience to work immediately.
5. Expand and accelerate leadership development. Make leadership development experiences available to a broader population of managers and employees – not just the designated high potentials or those tapped for succession.

6. Rejuvenate management careers. Use leadership development experience as a means of reengaging and rejuvenating the careers of midcareer managers, starting with those whose services the organization most needs to retain.
7. Admit late bloomers. Enable people to enter the leadership pipeline relatively late in their careers, including after changing careers or reentering the workforce.

LABOR MARKET: YOUNG WORKERS

Young workers are in demand. As a proportion of the workforce, this younger cohort has shrunk dramatically over the last two decades. In 1980, over half the workforce was under thirty-five. Now that percentage has leveled off at about 38 percent. There simply will not be multiple young candidates applying for every opening. Competition for the best educated and most skilled of the lot will only intensify, as will efforts to retain them because they seem less loyal and more apt to job-hop than their parents were. The average tenure for workers in all age groups has been gradually declining for the past several decades. For workers under age thirty-five, the average is under three year; 80 percent of the young worker cohort has tenure of five years or less and fully one-third are in their first year with the employer.

Young workers are also unhappiest on the job. According to a recent survey, this cohort had the lowest overall satisfaction and engagement levels. They are struggling to adjust to the demands of their professional and private lives, more than most employers might imagine. They distrust large organizations, and they often refuse to compromise work arrangements and workplace style. The employer who banks on youthful enthusiasm and desire to please, so characteristic of yesterday's young workers, is in for shock.

Based on a recent study what young workers expect from work are the following:

- Individual responsibility, freedom to make decisions
- Sociable and enjoyable colleagues and workplace
- Opportunities to learn and grow
- Team-based work, collaborative decision making
- Lots of feedback, frequent and constructive reviews
- Accessible managers, open communications
- Respect from older coworkers
- Pay for performance
- Flexible schedules and ample time off

Twentysomethings are always experimenting with work and career, and, statistically, today's young workers job-hop as much as their counterparts did twenty years ago. Today, however, they make no apologies for hopping. Even the highly desired young

employees – recruited from college, put in fast-track development programs, and expected to stay – are less willing to “play the organization way” and more ready to depart.

Recommendations regarding efforts at recruiting and retaining young workers are:

1. Institute rapid incorporation. Often in government when a new employee is hired he or she participates in a new employee orientation that consists of one or more days of introductions to their new organization. These efforts constitute an event-based introductory process and often are unsuccessful in helping the new employee hit the ground running and have an immediate impact. Rapid incorporation involves establishing the conditions for success from day one of employment by getting people up to speed quickly as possible. Accelerating their learning and contribution builds satisfaction and commitment, not to mention organizational business value, which lengthens their productive tenure and sets the cornerstone for retention.
2. Talk with young workers regularly, both individually and in focus groups. Do not rely exclusively on formal surveys. Ask them to evaluate the organization.
3. Execute continuous retention. Young workers remain loyal as the work, the workplace, and the management stimulates and engages. Many employers struggle to cultivate a strong sense of organizational loyalty in young employees. Best-practice organizations know the secret is to understand what keeps their young workers motivated and productive (and what will send them heading for the exits), and consistently providing them with what they seek most from the work experience. Their innovative work environments and management practices both engender loyalty and inspire outstanding performance in younger workers. To retain younger workers continually, agencies should provide three basics, corresponding to what young employees insist on:
 - A thoroughly engaging workplace featuring collegiality, teamwork, fun, and most fundamentally, democratic participation.
 - Ample opportunity to learn and grow, including assignments that expand skills and the leeway and mobility to try one’s hand at a variety of activities.
 - Attentive management, where the direct manager not only appreciates individual employees’ points of view but also attends to the employee’s needs and progress and explicitly encourages – and is accountable for – retention.
4. Make exit interviews work for you and the employee. While many of the agencies do conduct exit interviews, summary information and subsequent steps put in place as a result of analyzing exit interview information was not obtained, and may not exist.

In summary, this report identifies a number of factors that are confronting the ability of the nine county health agencies to recruit, retain, and develop talent.

Consequently, these issues detract from each agency's ability to address pressing community health issues. The recommendations offered are designed to positively impact those factors and assist each agency with efforts at systematically building their workforce in order to deliver valuable community-health related services.