



**Department
of Health**

Rebuild DOH: Initiatives and Organizational Change Update

JULY 29, 2022

Context and Objectives

So far in the Rebuild DOH effort we have worked together **on 8 strategic priorities** and developed in priority workgroups sets of **concrete set of actions and initiatives** to build DOH capabilities

We have also developed a **new organizational structure** that will allow DOH to better execute against these priorities

- Review Rebuild initiatives proposed
- Share DOH organizational changes

The mission of NYSDOH is to protect, improve and promote the health, productivity and well-being of all New Yorkers

Our commitment to the mission remains constant

In pursuit of the mission, and taking into consideration where we are now as an organization, we have identified 8 strategic priorities that will require renewed focus going forward

These priorities will guide our work over the next 3 years

NYSDOH strategic priorities



Make DOH a **great place to work** by recruiting, rewarding, and training diverse and talented professionals in a modern, flexible, and mission-driven environment



Make DOH an **impactful, collaborative, and efficient organization** by improving cross-divisional execution, data-driven decision making, and project management



Improve health equity and **reduce disparities** across racial/ethnic and socioeconomic groups – leveraging data to inform policies and measure outcomes



Reduce chronic disease burden through effective public health programs, new care models, and targeted Medicaid spending



Steward a **robust healthcare delivery system** which is high-quality, financially stable and has a sufficient, well-trained workforce



Ensure New Yorkers can **age in place as long as possible** with dignity and independence and have access to quality care if they need it



Prepare for the next emergency by implementing lessons learned from COVID and institutionalizing crisis response



Strengthen the **relationship between DOH and the Local Health Departments** to better meet public health outcomes

Five focus areas to Rebuild DOH and ensure delivery against strategic priorities



Invest in our people, bring in new and diverse talent, simplify hiring processes, and create a culture of support and appreciation after the significant sacrifices made during COVID response



Shape our organization so that it reflects our focus on health equity, the needs of older New Yorkers, emergency response, and elevates program and policy focus



Become more proactive and planful by developing policy coordination and project management capabilities and simplifying critical processes



Align public health, insurance and regulatory tools across divisions to maximize impact and improve health outcomes



Improve our use of data to advance our mission of improving public health and health equity

25 Rebuild initiatives prioritized for implementation in operating plan

Invest in our people

- **Hire for most critical positions in HR** (and other administrative roles) to move through candidate review and approval process more quickly
- Design and implement regular process to **prioritize existing vacancies** across the agency, including dynamic reporting on hiring pipeline to facilitate escalation
- **Reduce number of required approvals and restrictions** (including internal HR and Civil Service) for DOH candidates in application pipeline
- Promote **process for applying to DOH across underrepresented populations**, and advocate for making Civil Service selection criteria applicable to a wider group of potential applicants
- Define and **communicate the desired culture at DOH** and reinforce through trainings, recognition, frequent messaging, and staff surveys
- Implement all staff and program-specific annual mandatory **health equity, implicit bias, cultural competency and anti-racism** interactive trainings

Shape our organization so that it reflects our focus

- Build team to **conduct hospital financial analysis & improve oversight** of distressed hospitals
- Increase **communications, policy and data support for chronic disease programs** using flexible state funding rather than restricted grant funding
- Stand up and create operating model for the **Office of Health Equity and Human Rights**
- Stand up and create operating model for the **Office of Aging and Long-Term Care**
- Stand up **healthcare workforce office** and engage other state departments building workforce offices
- Elevate and refine the operating model for a new **Office of Emergency Preparedness** under EDC, including a clear chain of command for crisis response
- Define and implement updated **Regional Office operating model** and processes to engage regularly with LHDs (e.g., through annual surveys, town halls)

Become more proactive and planful

- Develop, implement, and communicate **new cabinet processes**, roles, decision-making authority, and meeting cadence
- Create **project management capability** that works with programs/offices to execute high-priority agency-wide projects and carries forward Rebuild DOH Strategic Planning process, providing regular updates to agency on progress
- **Streamline EDCC processes** and approvals

Align public health, insurance and reg. tools

- Implement a **DOH-wide health equity plan**, define approach to applying a health equity lens to all policies, and develop a regularly updated list of equity-related terms
- Align **Prevention Agenda with 22-25 MCO quality strategy** and other insurance designs
- Establish cross-division workgroup to coordinate implementation of **maternal health initiatives**
- Set up cross-division communication, and identifying hiring, technology and procurement needs to prepare for **implementation of HEROs and SDHNs**

Improve our use of data

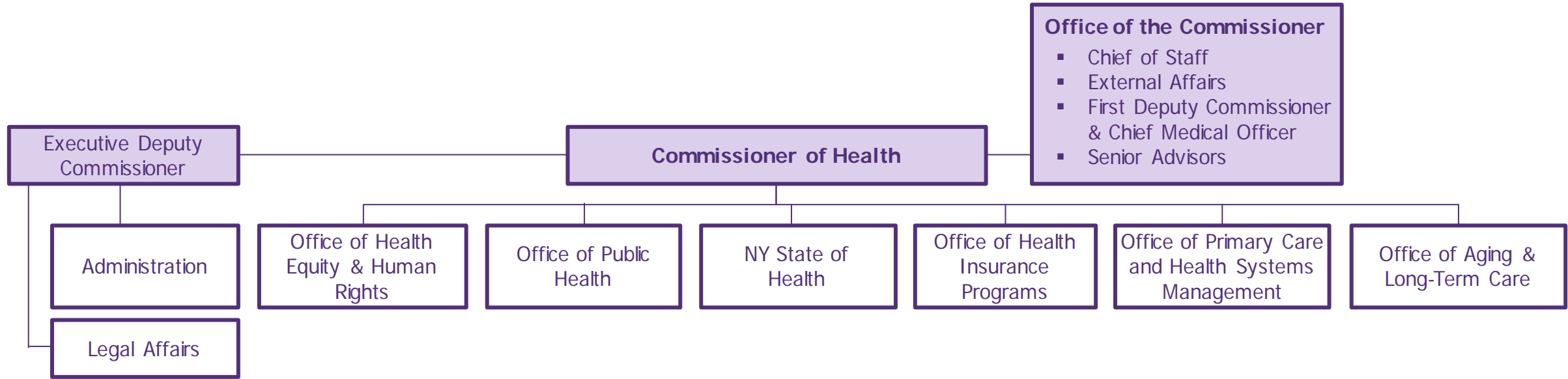
- Establish **Public Health Data Strategy & Analytics team** (Office of Science) to define cross-cutting questions impacting DOH and coordinate end-to-end analyses
- **Establish data management capability with OHIM** to set agency-wide data standards/policies
- **Inventory data used to examine health disparities** across the department to quantify access, source, and quality limitations, building on OHIP's ongoing gap analysis efforts
- Improve **chronic disease surveillance** by through use of SHIN-NY, beginning with streamlining ongoing and regular reporting of height and weight, and clinical assessment of overweight and obesity for children
- Enable office leaders who have financial responsibilities with easy-to-use tools, training, and info needed to dynamically **monitor and manage budget**

Summary of org changes and considerations

In addition to the initiatives, to Rebuild DOH we should **fix broad types of organizational changes**

- 1. Forming a cabinet of senior leaders** reporting to the Commissioner with oversight over key programs and policies that impact health
- 2. Dedicating senior leadership attention to advancing our internal functional capabilities**
- 3. Elevating new and existing functions in our organization** to reflect our focus on health equity, the needs of older New Yorkers, emergency response, and elevates program and policy focus
- 4. Integrating regional directors into public health policy making** to improve relationships with LHDs and maximize impact in the regions
- 5. Improving data capabilities** to advance our mission

New NYSDOH senior team will consist of fifteen executive team members



New structure will drive more effective decision making and collaboration across the organization

