



FY18 Department Director Work and Performance Plan

GIBBIE HARRIS, HEALTH DEPARTMENT



SECTION 1: DEPARTMENT KEY INITIATIVES

Key Initiative #1: Health and Human Services Integrated Service Delivery Project

Link to Strategic Business Plan:

No

Description:

Provide executive direction and project leadership in a manner that transforms current service provision from a Regulative Business Model to an Integrative Business Model, expanding the focus beyond eligibility and adherence to policies/regulations to a more comprehensive focus that considers “the root causes of clients’ needs and problems by coordinating and integrating services at an optimum level.”

Rationale:

Providing human services is a core function of Mecklenburg County government. Numerous residents receive services from more than one human service department. There are many collaborations within the Human Services Agency, however these have occurred at the program or service level. This project will take a broader look at how the County’s Human Services Agency can be organized to serve residents more effectively and efficiently. Focus will be on the following items:

- Improving the health and well-being of Mecklenburg residents, especially people most in need of support and assistance, emphasizing education and prevention and optimal human service delivery.
- Seeking more opportunities to involve and integrate Human Services Agency departments in collaborative service delivery.
- Seek to establish an integrated customer interface to improve both the customer experience as well as the outcome of the services provided.

Completion Date:

This is a multi-year plan with the completion date yet to be determined.

Updates/Project Milestones:

- Actively participate in ongoing Change Management Strategy Sessions w/Health & Human Services Directors
- Finalize Community Resource Center Governance Charter in partnership w/Health & Human Services Directors – includes organizational and operational protocols, organizational roles & responsibilities, and Service Level Agreements
- Develop Community Resource Center Key Performance Indicators, Success Measures and other Metrics of success as needed in partnership w/Health & Human Services Directors
- CRC Prototype Implementation/Opening – May 2018

Outcome/Measures:

End of year reporting ONLY.



Key Initiative #2: Public Health Transformation

Link to Strategic Business Plan:

Yes

Description: Provide executive direction and project leadership in transformation of department to ensure exceptional public health services, including the delivery of quality care.

Rationale: In response to a major quality issue within the department, external consultants and Mecklenburg County's Internal Audit team conducted a review of the Public Health Department and presented a series of recommendations for improvements across the department to ensure exceptional public health services, including the delivery of quality care. Consultant recommendations were aligned and prioritized into projects, which were accepted by the Audit Review Committee on 8/2/2017. The FY 18 focus of department transformation includes:

1. Execute department reorganization to reduce span of control and realign program areas for greater accountability and clinical/medical oversight
2. EMR optimization to implement enhancements to current platform and a technology needs assessment to analyze technology, equipment, capacity and conduct market assessment
3. Transform clinical care model from a program delivery model to a location-based delivery model; ensure staff perform at top of license; and enhance policies, procedures and protocols to adequately respond to customer needs
4. Conduct laboratory assessment to identify and assess alternative operational models and cost

Expand quality assurance/improvement capabilities to ensure quality of care and service

Completion Date: This initiative is part of a multi-year plan with FY18 milestones to be completed by 6/30/2018 presented below.

Updates/Project Milestones:

The milestones for FY18 are:

1. Implement department reorganization by March 31, 2018
2. Implement Cerner Optimization – PowerChart Touch by March 31, 2018
3. Implement Cerner Optimization – Patient Portal by March 31, 2018
4. EMR Technology needs assessment and market analysis by June 30, 2018
5. Implement a location-based clinical delivery model by June 30, 2018
6. Complete assessment of laboratory cost and operational models by March 31, 2018
7. Complete quality assurance and improvement implementation plan by March 31, 2018



Outcome/Measures:

| Outcomes/Measures | Target | Result | % of target Achieved |
|--|--------|--------|----------------------|
| Implement department reorganization by March 31, 2018 | 100% | | |
| Implement Cerner Optimization – PowerChart Touch by March 31, 2018 | 100% | | |
| Implement Cerner Optimization – Patient Portal by March 31, 2018 | 100% | | |
| EMR Technology needs assessment and market analysis by June 30, 2018 | 100% | | |
| Implement a location-based clinical delivery model by June 30, 2018 | 100% | | |
| Complete assessment of laboratory cost and operational models by March 31, 2018 | 100% | | |
| Complete quality assurance and improvement implementation plan by March 31, 2018 | 100% | | |



Key Initiative #3:
Timely Implement Management Action Plans in Response to Internal Audit Recommendations

Link to Strategic Business Plan:

Yes

Description:

Timely implementation of management action plan(s) based on the implementation date(s) in each internal audit report recommendation response.

Rationale:

- Hold management accountable for timely implementation of any outstanding audit report actions plans to help improve the governance, risk management, and internal control of the department and the organization.

Completion Date:

- The completion date is as indicated in management's action plan for each audit recommendation
- Action plans for performance are limited to those whose implementation dates fall within the fiscal year (July 1 – June 30)
- Action plans are not considered implemented until they have been validated during Internal Audit's follow-up activities conducted in Quarter 4 of the fiscal year and are assessed as implemented and working as expected.
- Action plans that are not fully implemented or not working as expected are considered open (not implemented) and will roll over into the next year's work plan.
- Successful is 90% or above

Updates/Project Milestones:

- Milestones are based on management's implementation dates provided in their audit.