

# EXECUTIVE SUMMARY

The Milwaukee Health Department's 2022-2027 strategy is defined by transitions: between pandemic and post-pandemic leadership; between past and future operating models. Our objective is to transition the department to a Public Health 3.0 (PH 3.0) model that is built on anti-racist competencies, practices, and policies.

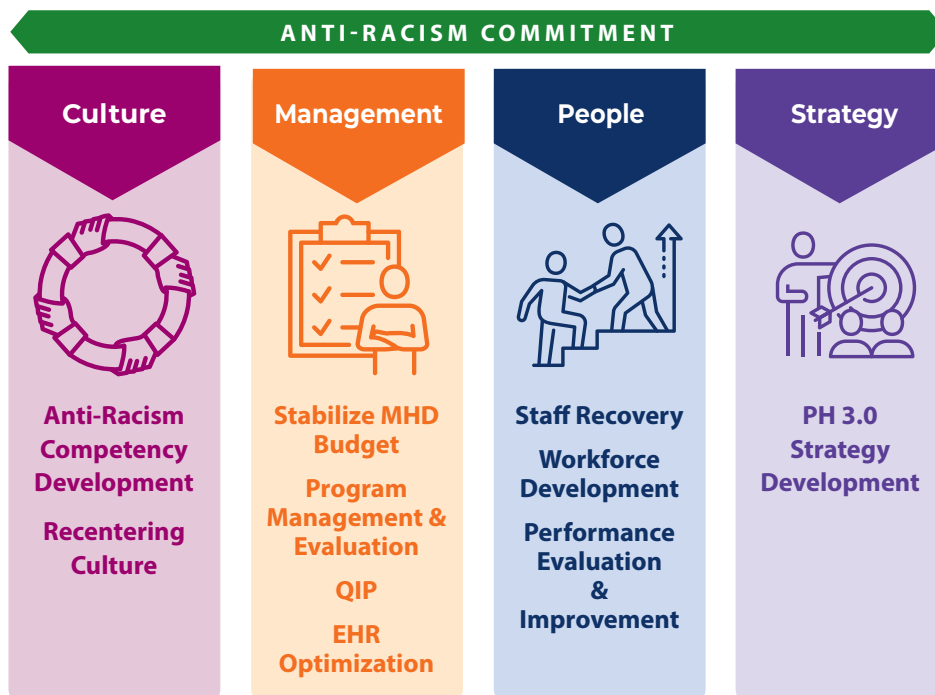
## Why a Public Health 3.0 Model?

Years of science and lived experience tells us healthy societies lead to healthy people. Milwaukee residents want us to evolve our relationship with our community, from one primarily of service-provider to strategist, policy-maker, advocate, and partner. The Public Health 3.0 (PH 3.0) model charts this path. Cities across the nation are looking to the PH 3.0 model as the next best-practice model, grounded in years of evidence. It is more agile and responsive to community needs, enabling health departments to quickly and effectively respond to community health needs, from viral threats to community engagement. And as a public asset, a PH 3.0 health department is a smart investment due to enhanced financial sustainability and partnerships.

## How we intend to get there: Anti-Racism Approach to Strategy

Anti-racism is a core tenet of PH 3.0, requiring institutions with power – like MHD – to critically assess how we use our authority, share and divest of power wherever possible, and commit to restructuring or dismantling systems that create unhealthy or inequitable environments. Through this strategic plan, we will explore how racism has influenced all aspects of our work: from how we are structured as a public agency to the programs we offer, the employees we hire, the data we collect, the policies we support, and the messages we promote. Becoming an anti-racist organization requires us to make additive investments in activities such as staff training, analytics support, or leadership positions. It also requires us to examine and act on the anti-racist opportunities to change our daily operations, service delivery, collaborations, and partnerships. As such, anti-racism efforts are presented as both discrete strategies and tactics (e.g., anti-racism training), as well as aspects of more traditional health department strategies and tactics (e.g., program evaluation).

Figure 1. MHD Strategic Initiatives, 2022-2025





## Strategic Goals

MHD's strategy is organized in two sequential, interdependent phases.

- **PHASE 1.** The focus of Phase 1 is **Recovery and Reset** from pre- and pandemic years to enable the department's transition to a Public Health 3.0 model. Occurring between July 2022 and June 2025, Recovery and Reset will focus on four thematic areas: culture, management, people, and strategy. Strategic planning for this phase is presented in detail, including strategic goals, tactics, measures, owners, and enablers.
- **PHASE 2.** In July 2025, MHD transitions to Phase 2 of our strategy, which is a formal transition to **Public Health 3.0** operations. The primary roadmap for this transition will be the Public Health 3.0 strategy, which is slated for development in Phase 1.

## PHASE 1: RECOVERY and RESET (July 2022 – June 2025)

### Goal 1: Anti-Racism Competency Development

Improving the health of Milwaukee cannot be achieved without improving health equity, and health equity cannot be advanced unless we acknowledge and address racism in our society and in our organization. This work does not begin in this strategic plan, but it does take an important step forward with a department-wide commitment to developing anti-racist competencies. Through Goal 1, we will ensure all MHD staff have fundamental knowledge as to why MHD will become an anti-racist organization, how the department will cultivate anti-racist practices and competencies, and what is expected of all staff members to support this work.

### Goal 2: Recenter Culture

MHD's culture blurred over several years of leadership turnover and crisis management. Defining our culture – whether in affirmation of long-held beliefs, or in endorsement of new expectations – is critical to the overall success of this strategy, and in the department's transition to a Public Health 3.0 model. MHD resolves to clarify our cultural norms and aspirations through Goal 2 of this strategic plan and commits to reinforce its culture through daily work.

### Goal 3: Financial Alignment and Sustainability

Demand for public health resources increased significantly over the last five years, as have expectations for transparency, accountability, and sustainability in funding. In our 3rd goal, MHD endorses strategies and actions to ensure that funding pursued and accepted by MHD aligns with the goals of this strategic plan and available resources (e.g., people, data, etc.). In addition, these strategies enable MHD to efficiently sustain critical services and supports.

### Goal 4: Program Evaluation & Improvement

As stewards of Milwaukee's health, it is imperative MHD understand the impact of its many programs and to share that information with the public. In Goal 4, MHD will build out its programmatic evaluation and improvement work by cultivating program-specific data assets, developing staff and data standards for evaluation, and setting department-wide expectations for performance reporting and transparency. This foundational information will help leaders understand which programs have the greatest impact, where to invest new resources, what improvement opportunities exist, and how to tell the story of MHD's work.



## Goal 5: EHR Optimization

Meaningful, granular, and comprehensive data is necessary for MHD to understand its current performance and to effectively transition to a Public Health 3.0 model. The department's recent installation of a centralized and unified electronic health record system is a major step forward for the department. Goal 5 focuses on optimization of this system to ensure that programs are accurately documenting client interactions, clinical care, and tracking programmatic outcomes. It will also ensure consistent collection of specific types of data (e.g., race, ethnicity, language) to inform equity analysis and anti-racism efforts.

## Goal 6: Staff Recovery

Over the last five years, MHD staff served City residents through extraordinary times of disease, community traumas, and leadership upheaval. The result is an exhausted and hurting public health workforce. The wellbeing of MHD's staff is at the center of MHD achieving its goals and serving Milwaukee residents. Therefore, our 6th strategic goal is to support MHD staff in personal and team recovery, and develop personal, interpersonal, and organizational practices for ongoing stress management.

## Goal 7: Workforce Development

MHD's greatest asset is its people. The absence of a clear workforce development strategy and support at a time of crisis management during the COVID-19 pandemic created unprecedented challenges for employee morale, recruitment, and retention. In Goal 7, MHD commits to a significant investment in its people by establishing an MHD-wide workforce development strategy, focusing on equitable recruitment, retention, compensation, promotion, and skill development for all MHD staff.

## Goal 8: PH 3.0 Strategy

MHD is poised to transition to a Public Health 3.0 model over the five-year strategy window. Doing so requires careful examination of the implications of this transition on roles, partnerships, funding, data collection, communications, and other department functions or responsibilities, and particularly the sequencing and pace of changes to any of the above. MHD's 8th goal is to create a strategic plan specifically for the transition to a PH 3.0 model, for implementation beginning in Year 4 (July 2025).

## PHASE 2. Public Health 3.0 (July 2025 – June 2027)

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MHD's focus in the final two years of its strategy is to complete the transition to a Public Health 3.0 model, as directed by the strategy developed during the Recovery and Reset phase, and further embed anti-racist practices and policies in all aspects of work. The environment in which MHD leaders will advance these strategies, however, is unknown. The scenarios that may be present are also widely variable. As such, MHD leaders approached planning for the final two years of our strategic window by establishing clarity on the ultimate objective – an operational 3.0 model – and exploring possible factors that may encourage or disrupt achieving that outcome. More detail on this analysis and subsequent planning is available in the full report, accessible here.

For more information on MHD's strategic vision, please read the City of Milwaukee Health Department's 2022-2027 Strategic Plan, available for online review and download at [milwaukee.gov/Health/Reports](https://milwaukee.gov/Health/Reports).