HEALTH & HUMAN SERVICES (DHHS)

2020-2025 DHHS STRATEGIC PLAN: *CREATING HEALTHY COMMUNITIES*

After a comprehensive planning process for the DHHS 2025 Future State, the department developed the "2020-2025 DHHS Strategic Plan: Creating Healthy Communities," a roadmap for how DHHS plans to improve individual and community health by addressing social determinants of health and working toward racial and health equity. The plan outlines goals for 2025 that will create lasting, transformative change.

The department consists of: Aging and Disabilities Services, Behavioral Health Services, Children, Youth and Family Services, Housing Services, Management Services, and Veterans' Services.

The strategic plan is driven by two strategies:

- **No Wrong Door/Integrated Services and Care**, addressing coordinating care and managing human service needs, as well as addressing social determinants of health.
- **Population Health and System Change**, being a change agent to address racial equity and increase prevention in human services systems.

The following focus areas outline goals and indicators of success. These goals describe how DHHS is executing the work and will progress toward the Future State.

Focus Area	Goals	We will know we're successful when we…
Racial & Health Equity	DHHS organizes to advance racial and health equity through the refinement of tools, investment in resources, and linkages to evaluation capacity and community engagement standards.	Measure the percentage of staff who identify racial and health equity as a DHHS priority. Increase the percentage of staff that agree with the statement: leadership visibly supports diversity and inclusion with their actions and not just words.
	DHHS will operationalize racial and health equity by partnering with communities and institutions to address disparities due to structural racism, with vendor partners and funders to set concrete targets which eliminates racial and health inequities in the community.	Increase vendor diversity by benchmarking the current proportion of DHHS contracted providers in 2021 who are led by minority leadership and increasing the percentage of minority-led contracted providers.
	DHHS will utilize participant and community feedback, quality of life indicators, and other metrics to drive decision making and target services where they are needed.	Measure the ratio of staff and contracted staff that indicate the effectiveness of racial equity, training, achieving an increase in the ratio.
		Track investment of funds serving individuals in targeted vulnerable geographic areas.
Integration	DHHS completes a series of projects to develop streamlined systems of care for children and adults. Efforts are also made to center services around participants and implement a consistent practice model while eliminating organizational inefficiencies.	Measure improvement of program participants and family quality of life outcomes across DHHS programs.
	DHHS incorporates social determinants of health and joint screening in call centers for children and the newly established Aging and Disabilities Resource Center.	Improve the ability for individuals to get their basic needs met.
	DHHS continues to establish effective partnerships to collaborate seamlessly within its youth and adult systems of care so people may enter through any "door" and are able to access orchestrated care across DHHS, Milwaukee County, and partners' programs.	Measure individuals' progress toward self-sufficiency after program participation.
Organizational Development & Staff Support	DHHS advances workplace culture strategies through the implementation of recommendations from compensation and position analyses, enhancing partnerships which reflect alignment of efforts, and sustaining investments in staff supports.	Increase the percentage of staff that agree with the statement: they would recommend DHHS to others as a great place to work.
	DHHS is an employer of choice in human services, resulting from operationalizing a new strategy-aligned organizational chart which reflects a talent model that considers equity, employee training, workplace culture, leadership development, and retention.	Increase the percentage of staff and contracted staff who are non-white. Increase the percentage of job candidates interviewed for positions who are non-white.
		Increase the number of non-white staff in leadership/supervisory roles.
		Increase the number of non-white staff who are promoted to leadership.
		Reduce voluntary staff turnover across staff levels.

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System Change/ Partnerships/ Advocacy	Sustain and build on partnerships within current system work, build community support for change, and build partnerships to address social determinants of health (SDOH) in the work of DHHS.	Improvement in measure of non-natural deaths amongst working-age (16-64) Milwaukee County residents.
	DHHS is developing and formalizing relationships and several pilots for partnership on SDOH, including annual assessments and monitoring of agreed upon wellness goals.	Decrease the number of individuals experiencing homelessness in Milwaukee County.
	In partnership with mission-aligned organizations, with community members and with other County departments, align on well-being goals, and move human service and social determinant systems toward addressing racial equity and prevention, including changes in how services are funded.	Increase access to and availability of affordable, safe, and energy efficient housing for low-income residents.
		Decrease the number of evictions across Milwaukee County.
		Decrease unemployment rate for individuals 16-24 in Milwaukee County, compared to overall unemployment levels.
		Measure the number of calls to the DHHS operated crisis call line.
		Increase enrollment in early childhood development programs.
Financial Sustainability/ Building Resources	Establish systems and baseline information to track funding, improve flexibility and reimbursement, align service area funding requests, and increase visibility to government and nongovernment sources of support.	Increase funding for primary and secondary prevention and resources, compared with 2020 budget baseline.
	Develop the framework for DHHS's role in primary and secondary prevention, with partnerships and funding for resource development/support; more than $10 million of annual incremental funding or partner contribution identified for primary and secondary prevention; relationship building for future, long-term funding.	Increase funding from new sources, including: • Technical assistance grants from national and regional philanthropy/public entities. • Through collaboration with partners shape local and state policy to recalibrate spending on acute services to invest upstream. • Utilize tax levy to prove prevention models and secure funding to sustain those models. • Advocate for better reimbursement for upstream services. • Make the case to private sector entities and philanthropy to invest in population health.
	Develop organizational capacity to partner, shape, win, and manage diverse set of funding opportunities, with the goal of increasing primary and secondary prevention spending or partner support by 100%+ from 2021 baseline.	
Building Organizational Capabilities	Establish models and implementation approaches that benchmark progress for community involvement, leadership development, outcomes evaluation, and community research. This includes documenting these practices to enable planning and optimization.	Measure the extent of community involvement in setting priorities, direction, and implementation of DHHS programs.
	Pilot evaluation/research capacity across all service areas; a community involvement function has been established; leadership development is structured, and pilot projects are in place. These efforts are supported in frameworks that are sufficiently resourced and documented.	Grow evaluation methods and research partnerships with academic partners.
	DHHS has participant and population outcomes embedded in all programs, has evaluation/research partnerships to improve outcomes, and has been noted by local and national leaders for its involvement (and capacity building) of affected communities in all levels of decision-making, from direction-setting to implementation. Internal resources established to guide current and future departmental leadership to execute these goals.	
Facilities	DHHS seeks to locate in sites that are physically closer to and more accessible for participants, co-locating in spaces that residents trust and where they seek out help.	DHHS is going through a significant geographic transition of services from the Behavioral Health campus on Watertown Plank Road in Wauwatosa to various community locations in 2021-23; related success measures include metrics related to access: • Number of participants accessing behavioral health care (before and after transition) • Proportion of participants accessing behavioral health care from vulnerable zip codes • Measure of awareness and accessibility of service locations
	Set direction for new DHHS locations that are supported by identified funding, and which are accessible to program participants, key partners, and other county services.	
	DHHS has transitioned majority of its staff to its administration location that is in alignment with strategy, co-located with most trusted community providers and supported by staff; Senior Centers/ Housing projects are aligned with the Strategic Plan, facilitating greater access to services and programs.	
Technology	Affirm direction on the suite of technology tools required to meet the department's needs; significantly reduce use of manual/paper processes; prepare for implementation of case management of updated Electronic Health Record (EHR).	• Technology platforms have been implemented that integrate systems across the department creating a comprehensive technology solution. • Technology is used to advance the No Wrong Door model of customer service internally and externally.
	All service areas are transitioned to a streamlined, connected case management system that allows a singular view of participants and their outcomes; case management is connected to a new HER solution, call center, fiscal tools; pilots are launched to increase public facing tools available to residents to enable access without requiring a phone or in-person interaction; all these efforts lead to automation and little paper being utilized in service.	

To learn more about Milwaukee County's journey toward racial equity, please visit **county.milwaukee.gov/Vision**.

To learn more about the DHHS 2020-25 Strategic Plan: Creating Healthy Communities, please visit **county.milwaukee.gov/EN/DHHS/About/Strategic-Plan**.

MILWAUKEE COUNTY
DEPARTMENT OF HEALTH & HUMAN SERVICES
Together, creating healthy communities.