**Public Health Seminar II**

**Spring 2022**

**Final Project**

**Leadership Case Analysis**

 **Purpose:** The purpose of this assignment is for students to demonstrate critical thinking around leadership, vision, negotiation, and communication for solving an adaptive public health challenge within a public health department.

**Scope:** This is a fictional case. Please read [the case](#_This_is_a) and all its details thoroughly. The assignment has 3 components (see outline below).Students will work in teams of 2-3 students from the same section.Your final submission can be in a maximum of two document (one Word document and one Excel document for the tables – you can also copy the tables into a word document and submit just one file) submitted through Canvas. Follow the guidelines in each section below for format and length.

**Due Date:** One week post final class for your session, 5pm. Please place all group member names on the first page. Only one group member needs to submit the project to Canvas. All group members will receive the same grade.

**Assignment Components:**

1. **Stakeholder Analysis**:

With the information given in this case, define the adaptive challenge and complete a stakeholder analysis.

1. Describe in one or two sentences what the challenge is in this case.
2. Identify and prioritize whom you believe to be key stakeholders in solving this adaptive challenge. Use the Stakeholder Prioritization Table in the Excel file.
3. Complete the Stakeholder Mapping Table in the Excel file. Be as specific as possible for each cell. If you are unsure or if the info is unknown, specify that.
4. **Strategy for Gaining Approval**

Describe the strategy you will use to gain approval. This section is a narrative that explains the approach, process and tactics you will use to influence the Director of the Health Department to approve your proposal. It should be based on the results of your stakeholder analysis. Be specific, but concise. Describe any leadership principles, collaboration and influence tactics, communication and negotiation strategies, and the relevant sequencing of your approach. This section should be between 1.5-3 pages, single-spaced, 12 point font, with 1 inch margins. Questions to consider:

In what sequence will you approach various stakeholders? What collaboration or negotiation skills are needed for internal support? How will you propose negotiation and/or collaboration with your colleagues? What approaches will you use for external stakeholders?

1. **Message Framework (see below) that supports your strategy**.
	1. Develop a vision for change – in one or two sentences.
	2. Identify key talking points (5-10) to help you achieve this change and to gain approval from various stakeholders. Consider the perspectives of stakeholders with diverse professional backgrounds and interests.
	3. Identify which key talking points you will use with *each character* in order to implement your strategy.

Note: Complete ii and iii in a table format. (See [Table 2](#_Table_2:_Talking) below.)

# **PHS II Final Project Grading Rubric**

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| **Section** | **Excellent:**  | **Satisfactory:**  | **Underdeveloped:**  |
| **Stakeholder Analysis****40 points** | Presents a compelling statement for what the challenge is.Stakeholder analysis tables are completed comprehensively and includes indication of support/justification for each stakeholder.35-40 points | Challenge statement is underdeveloped, unclear, or not relevant. Stakeholder analysis is underdeveloped, unclear, or not relevant for one or two stakeholders and/or does not include justification.30-34 points | Challenge statement is missing. More than two stakeholders and/or their justifications are underdeveloped or missing. 0-29 points |
| **Strategy****40 points** | Strategy demonstrates substantial consideration and provides multiple, thorough yet concise strategies for gaining approval, includes sequencing of approach.35-40 points | Strategy development does not include leadership principles, collaboration and influence tactics, communication and negotiation strategies, and the relevant sequencing of the approach.30-34 points | Strategy is missing or severely underdeveloped.0-29 points |
| **Vision and Message Framework.****15 points** | Vision for change is clear and appropriate for the given case. Includes multiple (5-10) key concise talking points relevant to the case. Talking points are linked to the specific stakeholders and are appropriate for each.15-20 points | Vision is not clear or is not relevant for the case. Talking points are not sufficient in number or are not clear in messaging. Talking points are not included for each prioritized stakeholder.10-14 points | Vision and/or talking points are not relevant or is severely underdeveloped. 0-9 points |
| Writing Style**5 points** | * Well organized
* Within the formatting guidelines,
* No more than 1-2 minor editorial issues.

5 points | One of the following:* Writing is not well organized, clear, or concise.
* Multiple minor editorial issues

2-4 points | * Multiple minor editorial issues
* Major writing issues that make it difficult to understand the meaning of the writing

0-1 points |
| **Feedback:**  |

# **This is a fictional case**

***Please “live within the case” and accept the facts, goals and considerations as given.***

You are the Assistant Director for the Division of Behavioral Health, one of five Assistant Directors in the City Health Department. As Assistant Director, you provide leadership and management oversight of the Behavioral Health Division. You supervise four Program Managers, each leading a significant client-facing service. You, the Director of the Health Department, the other four Assistant Directors, the Chief Financial Officer and the Director of Public Information form the Department’s Management team.

**The Goal:**

In this case, your goal is to win approval to initiate a new school-based program to provide supportive mental health services to Latinx middle and high school students, a large number of whom are immigrants, many of whom are undocumented. The program is based on a model (known as Building on Strengths1) that has been reported to have positive results. The Principal of one of the middle schools brought the program to your attention. She suggested that it might be beneficial for her school and two other schools in the city to implement the program. Although the Mayor, City Council members, and other stakeholders may express opinions, **the Director of the Health Department is the individual who will make the decision.**

**The Need:**

During the last 10 years, two low-income neighborhoods have experienced a significant increase in Latinx residents, especially new immigrants from a small number of countries. A large number of these immigrants are undocumented. Within the two neighborhoods there is high unemployment or underemployment and limited access to health services. Although the Latinx community faces numerous challenges, it is a tight-knit community with high familial and social support within their neighborhoods. Although there is currently a lack of resources available for Spanish-speaking residents, parents are very interested in the academic success of their children.

Of particular concern is the increasing incidence of severe behavioral problems among Latinx youth. According to data from the national Youth Risk Behavior Surveillance System2, a higher than average percentage of Latinx youth carry weapons to school, use drugs and alcohol, and engage in unsafe sex practices. Teen pregnancies are also of concern. In addition, many of the students – particularly those who are undocumented – have experienced trauma. The schools complain of an inability to provide appropriate mental health services for their students due to budgetary limitations. The schools in question do not have any licensed mental healthcare providers on staff, and there are very few options for referrals in the community.

**Process:**

You instructed your staff to carefully research the program model, conduct a more detailed assessment of local needs, and develop a proposed implementation plan and budget. In particular, they collaborated on the proposal with the Director of Health for the City School Department. You then presented your proposal to the Health Department Director and the full management team, where you heard a variety of opinions about the proposal (see below). Before the Director makes his final decision in one month, the Health Department Advisory Committee (made up of seven political appointees) will be asked for its input. The first phase of implementation (if approved) will require a budget of $225,000. Although a local foundation has expressed interest, the majority of funds will need to be reallocated within the Department’s budget during the next annual budget cycle. The department budget is also tight, and only allows for a modest inflationary increase each year. You have suggested to the Director that the most logical areas for reallocation are the City health clinics or the Division of Public Health, which conducts health screenings, mammograms, STD testing, vaccinations, public education and other programs.

You have shared the proposal with a wide variety of stakeholders to learn about their opinions. Other people, upon hearing of the plan, have offered their opinions. Below are important stakeholders and influencers:

**Within the Department of Health:**

1. **Director of the Health Department.** He is an infectious disease specialist. He seems supportive of the proposal. However, he is retiring soon and is preoccupied with plans for the next phase of his next career. A new Director has not yet been appointed. It is unlikely that you would be considered, as the job has always gone to a physician, and you are much younger than other Assistant Directors are.
2. **Assistant Director for Health Clinics**. She oversees three city health clinics. She is an OB/GYN by training. Her initial comment at the management team meeting was that because of the extreme health needs of the Latinx population, Building on Strengths is a luxury the City cannot afford unless it is funded by private philanthropy.
3. **Assistant Director, Communicable Diseases**. She is an RN. She has recently been advocating for significant increased funding for her department (in collaboration with the Health Clinics) to support outreach to increase the flu vaccination rate among a growing low- income senior population. In the last two seasons, incidence of flu among seniors had grown and has been a big problem in senior living environments.
4. **Assistant Director, Division of Environmental Health**. They hold an MPH and are rather new to the position. Among the senior managers, they are your closest friend, and they have expressed support for your proposal.
5. **Assistant Director, Division of Epidemiology and Data Science.** He holds a PhD in Epidemiology and was previously an academic researcher. During the management team discussion, he commented that he would prefer to see stronger evidence of the effectiveness of the Building on Strengths program.
6. **Assistant Director, Division of Behavioral Health (you).**
7. **Chief Financial Officer.** He is a CPA. He holds an MBA and was formerly an auditor in a large public accounting firm. He generally tries to stay out of priority and fund allocation battles but is fiscally conservative and very worried about the coming budget year. He is married to a clinical social worker.
8. **Director of Public Information.** Originally a high school teacher, prior to this position, she was a community medical educator.

**Other Stakeholders:**

1. **Chair of the Public Health Advisory Committee**. He is a Family Practitioner. He is politically very close to the Mayor.
2. **Principal Central Middle School.** She holds a M.Ed. and was the individual who first contacted you about the program. She has provided much of the data for the proposal. She is extremely popular with parents and has been identified in the media as the most innovative and successful principal in the city.
3. **Director of Health, City School District**. She is a registered nurse (RN). She provides supervision and training to the system of school nurses.
4. **Director, Hispanic Community Center.** He is a community organizer. He directs a relatively new, small neighborhood center. It offers a volunteer-run health center two evenings a week. It has a very small budget, but strong resident support. Although in favor of increasing mental health services for Latinx youth, he has argued that he and the residents believe that the proper location for the delivery of those services is actually at the Community Center, where students will feel more at ease and build stronger relations with local adult role models.
5. **Asst. Director, Catholic Community Foundation.** She is a social worker. You have had preliminary discussions about possible funding. She is positive about the idea, and believes that the Foundation might be willing to make a grant of as much as $50,000 if the program is approved.
6. **Real Estate Developer & President of the local Business District.** He is owns a large amount of commercial real estate in the area, and has expressed great displeasure with the rapidly changing character of the neighborhood and growing crime. Quite publicly, he has called for the local city government to take steps to stabilize the neighborhood and prioritize expansion of police.

References

1. Price, O. A., Fishman, J. O. D. I. E., & Chapman, M. V. (2011). Building on Strengths: A School-Based Mental Health Program. *Retrieved from http://samples. jbpub. com/97807*, *63761318*.

2. Centers for Disease Control and Prevention. Youth Risk Behavioral Surveillance Survey. <https://www.cdc.gov/healthyyouth/data/yrbs/index.htm>

**Message Framework**

**Vision for Change/Core Message:**

**Key Talking Points. Identify as many as necessary. However, each must support and not conflict with Vision for Change/Core Message.**

A.

B.

C.

D….

## **Table 2: Talking points for stakeholders**

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| **Title of Stakeholder**  | **Key Talking Points (A, B, C, D…)** |
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