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MEMORANDUM

DATE: November 27th, 2024

TO: Chair and Members of the Personnel and Finance Committee

FROM: Sandra Bogar, Public Health Supervisor

SUBJECT: Public Health Planner Position #2770 Vacant for More than Six Months

County Ordinance 29.52(15) requires the Personnel and Finance Committee and the County Executive to approve filling positions that are vacant longer than six (6) months. Position #2770, a Public Health Planner has been vacant for more than six months after the incumbent resigned from Public Health. This position was included in the 2023 and 2024 budgets but was not filled due to the pursuit of a reclass for this position that was denied.

What is the nature of the work or what is the essential function of the position?

The Public Health Planner Policy Analyst position provides policy consultation and action support to our department. For example, this position supports the agency in developing an annual agency legislative advocacy agenda to support agency policy prioritization, planning, and action. In addition, this position helps to identify and implement policy tools and strategies to improve health, based on stakeholders' unique needs (e.g. supporting the development of written and oral testimony, developing agency position statements, and providing elected officials with research about the potential public health impacts of certain policies). In addition, this position supports agency policy trainings as well as policy tracking, which strengthens the department's ability to engage in effective and appropriate education, advocacy, and, occasionally, lobbying to support population health improvement.

How has this function been fulfilled without this position?

Some duties were covered by a position that includes .2 FTE towards policy. However, larger scale policy activities, such as annual trainings and policy tracking, were not possible in the absence of this position.

What will be the impact on the Department's function and mission if the position remains vacant?

If this position remains vacant, Public Health would not have the capacity or ability to be responsive to policy needs. Currently, only .2 FTE supports policy work, and we are not able to support the full range of policy support needs. For example, we would not be able to develop an annual agency legislative advocacy agenda or support agency policy prioritization, planning, and action. In addition, we would not have the capacity to identify and implement policy tools and strategies to improve health (e.g.

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supporting the development of written and oral testimony, developing agency position statements, and providing elected officials with research about the potential public health impacts of certain policies). Furthermore, we would be unable to support agency policy trainings as well as policy tracking, which strengthens the department's ability to engage in effective and appropriate education, advocacy, and, occasionally, lobbying to support population health improvement.

This position is also critical to the current landscape and future direction of the Public Health department. The department is working towards accreditation and is working to alignment itself with the Public Health Accreditation Board's (PHAB) Foundational Public Health Services. Policy development & support is one of PHAB's eight foundational capabilities. Our department likewise recognizes the instrumental role policy plays in improving health outcomes. A hallmark example is the role that policy played in dramatically reducing smoking rates and subsequently, lung cancer and other types of cancer via efforts like tobacco free place policies and cigarette taxes. Hence, this position not only supports organizational goals in centering policy as a key component of public health work, but is essential to upholding our #1 goal: supporting population health improvement.