Health

Education

Equity

Workforce

2024-2027 STRATEGIC ROADMAP

CO-CREATING A HIGH-IMPACT ACADEMIC HEALTH AND HUMAN SERVICES DEPARTMENT FOR SAN DIEGO COUNTY

LIVE WELL
CENTER FOR
INNOVATION &
LEADERSHIP

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INTRODUCTION

The visionary conceptualization of the Live Well Center for Innovation & Leadership (LWCIL) began pre-pandemic as trailblazing leaders from the County of San Diego Health and Human Services Agency (HHSA), San Diego State University (SDSU), and SDSU's College of Health and Human Services (CHHS) recognized how creating an even stronger partnership could improve their respective organizations and greatly benefit the region. With a long history of partnering to provide real world experiences for students, collaborating on research, and developing practice-informed curriculum, formalizing the partnership to intentionally integrate academia and health and human services practice was a natural next step.

In October 2022, HHSA and SDSU leaders signed a five-year memorandum of agreement (MOA) that launched the bold vision of creating San Diego County's first and only Academic Health and Human Services Department (AHHSD). By naming their joint endeavor the Live Well Center for Innovation & Leadership, the partners put a public stake in the ground to lead and innovate with respect to integrating academia and practice to inform and improve education, research, workforce development, and service. Together, they chose to use and adapt the national Academic Health Department (AHD) model to create an AHHSD for the San Diego region. By doing so, they gained access to the growing, nationwide network of AHDs to inform how best to achieve their aspiration of sustaining a high-impact academic-practice partnership.

HHSA and SDSU Leaders Sign the Live Well Center for Innovation & Leadership Memorandum of Agreement in October 2022

Between the 2022 MOA signing and today, a Steering Committee, co-chaired by HHSA's Agency Director and the Dean of SDSU's College of Health and Human Services (CHHS) has guided LWCIL's development. Comprised of HHSA's eight service department directors, five of CHHS's school directors, and other key representatives, the Steering Committee has created and hired a jointly funded director position, established three subcommittees focused on people, research, and service, and launched a formal strategic planning process, among other accomplishments.

A Strategic Planning Work Group was established to lead the development of LWCIL's 2024-2027 Strategic Roadmap. Over the course of six months, Work Group members met and collaborated on the creation of a shared vision, mission, values, guiding principles and diversity, equity, and inclusion statement. In addition, they analyzed the strengths, weaknesses, opportunities, and threats of their organizations and the external environment, while establishing priorities and goals appropriate for a start-up academic-practice partnership of LWCIL's type. The Work Group brought their recommendations for building and

sustaining an AHHSD to the Steering Committee in June 2024, which officially adopted the roadmap with its recommended changes in August 2024. This multiyear Strategic Roadmap is intended to be a "living document" as it outlines LWCIL's priorities and development based on the vision of current leadership and boundary-spanning capacity. As the partnership makes progress in adopting measures of success and advancing the identified priorities and goals, the roadmap will evolve from being a plan designed to establish and sustain an AHHSD to one designed to accelerate its growth, leadership role, and overall community impact.

As defined by this 2024-2027 Strategic Roadmap, LWCIL is embarking on an exciting and ambitious journey to become a national model of excellence in academic-practice partnership within a San Diego region that is healthy, equitable, safe, and thriving.

LWCIL Steering Committee members share their vision and ask for community input at the 2022 Live Well Advance.

ABOUT THE LIVE WELL CENTER FOR INNOVATION AND LEADERSHIP

The Live Well Center for Innovation & Leadership (LWCIL) represents the bold and visionary aspiration of the County of San Diego Health and Human Services Agency (HHSA), San Diego State University (SDSU), and SDSU's College of Health and Human Services (CHHS) to create a sustainable and high-impact Academic Health and Human Services Department (AHHSD) for San Diego County. LWCIL's development is informed by a national Academic Health Department (AHD) model which has demonstrated that strong, sustainable partnerships between academia and practice can improve education, research, workforce development, and service. The partners have co-created this roadmap to guide the strategic integration of academia and practice over the next three years and beyond. Special thanks to the following individuals for their leadership in establishing LWCIL and for their ongoing commitment to build a nationally recognized academic-practice partnership that is contributing to a healthy, equitable, safe, and thriving San Diego region.

STEERING COMMITTEE

County of San Diego Health and Human Services Agency	San Diego State University's College of Health and Human Services
- Kimberly Giardina, Co-Chair, Deputy Chief Administrative Officer, HHSA - Luke Bergmann, Director, Behavioral Health Services - Patty Kay Danon, Chief Operations Officer - Beverly Connolly, Director, Human Resources - Jennifer Bransford-Koons, Director, Aging & Independence Services - TBD, Director, Child and Family Well-Being Department - Elizabeth Hernandez, Director, Public Health Services - Barbara Jiménez, Director, Department of Homeless Solutions and Equitable Communities - Angela Mitchell, Chief Nursing Officer, Office of Nursing Excellence - Carey Riccitelli, Director, Office of Strategy and Innovation - Rick Wanne, Director, Self-Sufficiency Services - Ankita Kadakia, Interim Public Health Officer, Public Health Services - David Estrella, Director, Housing and Community Development Services	- Amy Bonomi, Co-Chair, Dean, College of Health and Human Services - Tracy Finlayson, Professor, School of Public Health, Co-Leader, Community Engagement Team, HealthLink - Steve Hornberger, Director, Social Policy Institute and Co-Director, Center for Excellence in Aging and Longevity - Karen Macauley, Director and Professor, School of Nursing - Amanda McClain, Associate Professor, School of Exercise and Nutritional Sciences - Corinne McDaniels-Davidson, Director, Institute for Public Health, Associate Director and Associate Professor, School of Public Health - Jong Won Min, Director and Professor, School of Social Work - Eyal Oren, Director and Professor, School of Public Health - Lianne Urada, Associate Professor, School of Social Work - Ignatius Nip, Director and Professor, School of Speech, Language, and Hearing Sciences - Matthew Mahar, Director and Professor, School of Exercise and Nutritional Sciences
Nicole Magnuson, Director, Live Well Center for Innovation & Leadership	

VISION

The Live Well Center for Innovation & Leadership is a national model of excellence in academic-practice partnership within a San Diego region that is healthy, equitable, safe, and thriving.

MISSION

To strengthen the partnership between academia and health and human services practice through integrated education, research, workforce development, and service that advances equity in San Diego County.

VALUES

Collaboration | Community | Equity | Excellence | Results

GUIDING PRINCIPLES

- Collaborate with shared accountability and power among partners.
- Center community in decision-making and priorities.
- Prioritize equity, inclusion, and belonging.
- Pursue excellence and foster a culture of innovation.
- Deliver measurable results while ensuring long-term viability and positive impact.

DIVERSITY, EQUITY, AND INCLUSION STATEMENT

We are committed to advancing diversity, equity, inclusion, and anti-racism within academia and health and human services. We recognize that academic and government systems are historically influenced by racist and exclusionary policies, practices, and ideas. We believe every person regardless of background, identity, age, or ability has a right to equitably access inclusive academic and practice-based learning, employment, and service opportunities. As a result, we seek to facilitate collaborations where each person feels they belong and has power, voice, and agency.

STRATEGIC ROADMAP PROCESS AND PRIORITIES FRAMEWORK

I n January 2024, the LWCIL Steering Committee launched a formal and collaborative strategic planning process with the goal of co-creating a multi-year roadmap to guide the development of a high-impact Academic Health and Human Services Department (AHHSD) for San Diego County. A Strategic Planning Work Group was created and brought together over several months for focused visioning and critical thinking about priorities that would align and leverage the partners' expertise, assets, and networks to advance education, workforce, and health equity across the San Diego region.

With integrating academia and practice to advance equity as a key motivator, LWCIL's Steering Committee is determined to create an AHHSD which values partnership, actively and authentically engages community, and consistently uses data to inform its activities. In addition, its leadership is committed to building an innovative, replicable, and sustainable infrastructure for LWCIL that effectively improves academia, policy, and practice far into the future.

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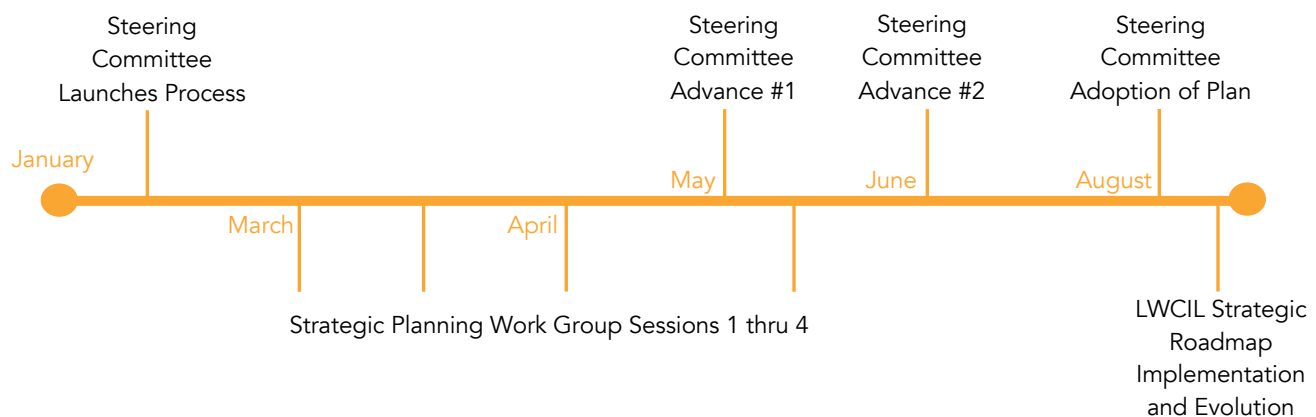As a result, LWCIL's Strategic Roadmap is organized around four high-impact priority areas:

1) **People Success:** Build a diverse, competent, and engaged health and human services workforce.

2) **Research and Data Excellence:** Inform and improve academia, policy, and practice with rigorous and relevant research.

3) **Service to Community:** Integrate academia, practice, and community to advance equity and eliminate health disparities.

4) **Leadership and Sustainability:** Create a nationally recognized academic-practice model with innovative leadership committed to improving academia, policy, and practice.

SPECIAL THANKS TO THE LWCIL STRATEGIC PLANNING WORK GROUP

County of San Diego Health and Human Service Agency	San Diego State University, College of Health and Human Services
- Eric C. McDonald, Co-Chair, Retired Interim Agency Director and Chief Medical Officer - Wilma Wooten, Retired Public Health Officer, Public Health Services - Carey Riccitelli, Director, Office of Strategy and Innovation - Brynn Viale Long, Deputy Director, Aging & Independence Services - Jessica Kattan, Deputy Chief Population Health Officer, Behavioral Health Services - Lauren Gabby, Chief of Agency Operations, Child and Family Well-Being Department - Shelly Tregembo, Chief of Agency Operations, Office of Strategy and Innovation - Rosa Gracian, Deputy Director, Department of Homeless Solutions and Equitable Communities	- Steven P. Hooker, Co-Chair, Retired Dean, College of Health and Human Services - Alyson Abel-Mills, Interim Associate Dean for Faculty and Academic Affairs, College of Health and Human Services and Professor, Speech, Language, and Hearing Sciences - Eyal Oren, Director and Professor, School of Public Health - Jong Won Min, Director and Professor, School of Social Work - Corinne McDaniels-Davidson, Director, Institute for Public Health and Associate Director and Associate Professor, School of Public Health - Steve Hornberger, Director, Social Policy Institute and Co-Director, Center for Excellence in Aging and Longevity - Judy Dye, Associate Professor and Concentration Chair, Graduate Nursing Programs, School of Nursing - Jennifer Tucker-Tatlow, Executive Director, Academy for Professional Excellence - Chuck Matthews, Interim Director, DrPH Program, School of Public Health
Nicole Magnuson, Director, Live Well Center for Innovation and Leadership	

Strategic Roadmap Development Timeline: January-August 2024

Steering Committee Launches Process

Steering Committee Advance #1

Steering Committee Advance #2

Steering Committee Adoption of Plan

January

May

June

August

March

April

Strategic Planning Work Group Sessions 1 thru 4

LWCIL Strategic Roadmap Implementation and Evolution

STRATEGIC ROADMAP SUMMARY: PRIORITIES AND GOALS

PRIORITY #1: PEOPLE SUCCESS
Build a diverse, competent, and engaged health and human services workforce

Goal 1.1: Establish and coordinate systems to ensure that diverse students are aware of and prepared for careers in health and human services.

Goal 1.2: Cultivate a workforce pathway of diverse and competent students, graduates, and alumni who understand career opportunities within and enter into health and human services careers.

Goal 1.3: Attract, retain, and develop a diverse, competent, and engaged health and human services workforce.

Goal 1.4: Facilitate equitable opportunities for academia and practitioners to actively share knowledge and information, and build collective capacity in education, research, workforce development, and service.

PRIORITY #2: RESEARCH & DATA EXCELLENCE
Inform and improve academia, policy, and practice with rigorous and relevant research

Goal 2.1: Ensure research and data sharing consistency, coordination, and innovation.

Goal 2.2: Formalize and systematize processes and procedures to facilitate and catalyze research and data sharing.

Goal 2.3: Co-produce rigorous research and high-quality publications that inform and improve academia, policy, and practice.

PRIORITY #3: SERVICE TO COMMUNITY
Integrate academia, practice, and community to advance equity and eliminate health disparities

Goal 3.1: Utilize equity-focused data and community-defined assets and needs to inform collaborative priorities and decision-making.

Goal 3.2: Maximize and develop organizational and community structures to facilitate the integration of academia, practice, and community.

Goal 3.3: Evaluate impact to inform and improve practice, service delivery, and community outcomes.

PRIORITY #4: LEADERSHIP & SUSTAINABILITY
Create a nationally recognized academic-practice model with innovative leadership committed to improving academia, policy, and practice

Goal 4.1: Build the academic-practice model infrastructure to support shared leadership, collaboration, and accountability.

Goal 4.2: Develop, align, and enhance resources and capacity to support operations, integration, and impact.

Goal 4.3: Leverage collective knowledge, leadership, and relationships to improve academia, policy, and practice.

PRIORITY #1:
PEOPLE SUCCESS

BUILD A DIVERSE, COMPETENT, AND ENGAGED
HEALTH AND HUMAN SERVICES WORKFORCE

ADDRESSING SAN DIEGO COUNTY'S HEALTH AND HUMAN SERVICES WORKFORCE NEEDS

The County of San Diego Health and Human Services Agency (HHSA) and San Diego State University (SDSU) have a long history of partnering to support the success of students, graduates, alumni, and the health and human services workforce. SDSU is one of the largest producers of graduates entering health and human service careers within the County. The College of Health and Human Services (CHHS) offers undergraduate, graduate, and doctorate degrees across six schools including Public Health, Social Work, Nursing, Exercise and Nutritional Sciences, Physical Therapy, and Speech, Language, and Hearing Sciences. Its robust academic programming and expanding footprint within the region makes SDSU and CHHS the learning institution of choice for many professionals interested in continuing to advance their learning and credentials throughout the course of their careers.

As one of the largest departments within the County of San Diego, HHSA is also one of the largest health and human services employers in the region. With more than 7,800 employees across eight service departments including Public Health Services, Behavioral Health Services, Child and Family Well-Being, Aging and Independence Services, Homeless Solutions and Equitable Communities, Housing and Community Development Services, Medical Care Services, and Self-Sufficiency Services, the Agency is in constant demand of a diverse and competent workforce. Consequently, the Agency's leadership is committed to promoting health and human services career pathways and helping to prepare the future workforce by providing practice-based experiential learning opportunities to both students and graduates. By doing so, HHSA's more than 350 contracted community service partners and the health and human services field overall benefits as well.

Like many communities across the nation, San Diego County is facing an alarming health and human services workforce shortage. An August 2022 regional report by the San Diego Workforce Partnership (SWDP) projected a shortage of 18,700 behavioral health workers by 2027.[1] Keep in mind, behavioral health workers are only a portion of the overall health and human services workforce, and statewide projections

regarding health worker shortages are even higher.[2] Further exacerbating the situation, some of the difficulties in retaining a diverse and competent workforce highlighted in the SDWP report included dissatisfaction with pay (56%), stress and burnout (39%), and the need for ongoing training and additional financial support in pursuing advanced credentials and degrees.

An aging population[3], increasing diversity[4], and continuing regional growth[5] are among the many factors fueling our urgency to partner in building a diverse, competent, and engaged health and human services workforce. LWCIL's vision of a healthy, equitable, safe, and thriving San Diego region means the County needs coordinated and sustained efforts to address current workforce shortages and future demands. Through our academic-practice partnership, LWCIL seeks to promote health and human services career pathways, prepare students for career success, cultivate a pathway of graduates entering the field, and attract, develop, and retain a diverse and competent workforce within academia and the health and human services field overall.

PRIORITY #1 | PEOPLE SUCCESS: BUILD A DIVERSE, COMPETENT, AND ENGAGED HEALTH AND HUMAN SERVICES WORKFORCE

Goal 1.1: Establish and coordinate systems to that ensure that diverse students are aware of and prepared for careers in health and human services.

Goal 1.2: Cultivate a workforce pathway of diverse and competent students, graduates, and alumni who understand career opportunities within and enter health and human services careers.

Goal 1.3: Attract, retain, and develop a diverse, competent, and engaged health and human services workforce.

Goal 1.4: Facilitate equitable opportunities for academia and practitioners to actively share knowledge and information, and build collective capacity in education, research, workforce development, and service.

PEOPLE SUCCESS: BUILD A DIVERSE, COMPETENT, AND ENGAGED HEALTH AND HUMAN SERVICES WORKFORCE.

Goal 1.1: Establish and coordinate systems to ensure that diverse students are aware of and prepared for careers in health and human services.

Measures of Success (Percentage/Number):
- Increase in student awareness of health and human services careers
- Increase in diverse students in practice-based experiences within HHSA
- Increase in practice-based experience opportunities within all levels of HHSA
- Increase in funding to support student practice-based experiences and the promotion of health and human services careers
- Increase in students with practice-based experiences entering HHSA and field careers

Strategic Objectives	Key Activities
1.1a. Maintain a student-focused Memorandum of Agreement (MOA).	▪ Review current student-focused MOA and identify opportunities for improvement. ▪ Revise, renew, and communicate student-focused MOA.
1.1b. Increase diverse students' awareness about health and human services careers.	▪ Develop a coordinated student-focused multimedia campaign to promote health and human service careers across CHHS and other SDSU schools. ▪ Collaborate with student associations and affinity groups to promote careers.
1.1c. Provide equitable access to enhanced and expanded practice-based experiences for diverse students.	▪ Document the needs and requirements for student practice-based experiences across HHSA departments and CHHS schools. ▪ Inventory, align, and expand student practice-based experiences across all levels of HHSA and departments. ▪ Survey students about desired practice-based experiences. ▪ Identify best practices and opportunities for improved efficiency and effectiveness in student practice-based experiences across HHSA departments and CHHS schools. ▪ Align the onboarding, orientation, and support of students in practice-based experiences across HHSA departments and CHHS schools. ▪ Develop coordinated SDSU/HHSA practice-based Scholars Program ▪ Assess student career awareness, interests, and satisfaction with practice-based experiences.

PRIORITY #1
PEOPLE SUCCESS: BUILD A DIVERSE, COMPETENT, AND ENGAGED HEALTH AND HUMAN SERVICES WORKFORCE.

Goal 1.1: Establish and coordinate systems to ensure that diverse students are aware of and prepared for careers in health and human services.

Measures of Success (Percentage/Number):
- Increase in student awareness of health and human services careers
- Increase in diverse students in practice-based experiences within HHSA
- Increase in practice-based experience opportunities within all levels of HHSA
- Increase in funding to support student practice-based experiences and the promotion of health and human services careers
- Increase in students with practice-based experiences entering HHSA and field careers

Strategic Objectives	Key Activities
1.1d. Engage high school and community college students in health and human services careers and higher education pathways.	- Launch and evaluate High School Health and Human Services Scholars Pilot. - Identify primary feeder high schools and community colleges to SDSU/CHHS. - Coordinate joint outreach efforts to high schools and feeder community college programs. - Collaborate on the development of a Public Health certificate offered by local community colleges.
1.1e. Attract funding and align available resources to support student awareness building and equitable access to practice-based experience programs.	- Identify resource needs and opportunities. - Assess current resources directed to student practice-based experiences and identify opportunities for alignment. - Leverage existing grant and resource development infrastructures to pursue joint funding opportunities. - Continuously monitor and assess emerging grant and funding opportunities.
1.1f. Improve the transition of diverse students from practice-based experiences to careers within HHSA, and the health and human services field.	- Assess availability of demographic, volume, and transition data for students in experience-based opportunities. - Utilize existing or establish new systems for tracking and monitoring the transition of diverse students from practice-based experiences into HHSA careers.

PRIORITY #1
PEOPLE SUCCESS: BUILD A DIVERSE, COMPETENT, AND ENGAGED HEALTH AND HUMAN SERVICES WORKFORCE.

Goal 1.2: Cultivate a workforce pathway of diverse and competent students, graduates, and alumni who understand career opportunities within and enter health and human service careers.

Measures of Success (Percentage/Number):
- Increase in diverse student contacts
- Increase in graduates aware of and interested in health and human services career opportunities
- Increase in practitioners engaged in mentorship opportunities (registered in Aztec Network)
- Increase in presentations to diverse student groups about health and human service careers
- Increase in diverse graduates and alumni inquiring about, applying to, and transitioning into HHSA careers

Strategic Objectives	Key Activities
1.2a. Formalize and coordinate efforts to educate and engage diverse students, graduates, and alumni in health and human services careers.	- Inventory and assess recruitment efforts by the County/HHSA departments. - Identify opportunities to align available resources to support HHSA-wide recruitment goals. - Inventory and prioritize SDSU campus recruitment opportunities. - Develop and pilot a coordinated "Agency of One" recruitment plan between HHSA and SDSU.
1.2b. Expand culturally matched support and mentorship of students, graduates, and alumni in service to career exploration, entry, and growth.	- Identify opportunities for practitioners to support and mentor workforce pathway prospects. - Leverage and promote existing mentor networks to connect practitioners with graduates and alumni.
1.2c. Facilitate the successful entry of diverse graduating students and alumni into health and human services careers.	- Identify barriers to understanding career pathways, accessing job opportunities, and successfully transitioning into careers. - Assess opportunities to partner with student affinity groups to support the recruitment and transition of graduating students into health and human service careers.
1.2d: Establish a system to track and report the transition of diverse students, graduates, and alumni into health and human services careers.	- Assess availability of relevant/needed data. - Utilize existing or create new data gathering and reporting systems and structures. - Formalize tracking and reporting of data.

COUNTY OF SAN DIEGO
HEALTH AND HUMAN SERVICES AGENCY

SDSU
San Diego State
University

PEOPLE SUCCESS: BUILD A DIVERSE, COMPETENT, AND ENGAGED HEALTH AND HUMAN SERVICES WORKFORCE.

Goal 1.3: Attract, retain, and develop a diverse, competent, and engaged health and human services workforce.

Measures of Success (Percentage/Number):
- Increase in competency (degrees, credentials, and continuing education credits) within HHSA workforce
- Increase in the diversity of HHSA workforce at all levels of the agency
- Increase in retention of HHSA workforce
- Increase in the diversity of the San Diego County's health and human services workforce

Strategic Objectives	Key Activities
1.3a. Enhance the skills and competencies of the SDSU/HHSA workforce supervising and supporting students in practice-based experiences.	▪ Identify and enhance current supports and staff development resources for supporting interns/student workers.
1.3b. Improve the competencies and retention of HHSA's workforce with aligned and expanded degree, credential, and continuing education credit opportunities.	▪ Inventory and share training and development resources available across partners and identify opportunities for collaboration. ▪ Create opportunities to collaborate on the training and development of the health and human services workforce and SDSU faculty and staff. ▪ Develop a pilot program to increase degrees and credentials within the existing health and human services workforce. ▪ Track and monitor degree, credential, and continuing education credits. ▪ Track and monitor the retention of workforce participating in competency improvement opportunities.
1.3c. Engage community partners to promote and attract diverse populations to health and human services careers.	▪ Identify collaborations focused on building a health and human services workforce. ▪ Develop a multi-faceted outreach and recruitment program to promote health and human services careers and attract diverse applicants.

PRIORITY #1
PEOPLE SUCCESS: BUILD A DIVERSE, COMPETENT, AND ENGAGED HEALTH AND HUMAN SERVICES WORKFORCE.

Goal 1.3: Attract, retain, and develop a diverse, competent, and engaged health and human services workforce.	
Measures of Success (Percentage/Number): • Increase in competency (degrees, credentials, and continuing education credits) within HHSA workforce • Increase in the diversity HHSA workforce at all levels of the agency • Increase in retention of HHSA workforce • Increase in the diversity of the San Diego Region's health and human services workforce	
1.3d: Establish a system to track and report the diversity within the health and human services workforce as well as the development and retention of a diverse workforce within HHSA and CHHS.	• Assess availability of relevant/needed data. • Utilize existing or create data gathering and reporting systems and structures. • Formalize tracking and reporting of data.

PRIORITY #1
PEOPLE SUCCESS: BUILD A DIVERSE, COMPETENT, AND ENGAGED HEALTH AND HUMAN SERVICES WORKFORCE.

Goal 1.4: Facilitate equitable opportunities for academia and practitioners to actively share knowledge and information, and build capacity in education, research, workforce development, and service.

Measures of Success (Percentage/Number):
- Increase in participation at academia-practice exchanges
- Increase in academia-practice integration within SDSU
- Increase in academia-practice integration within HHSA
- Increase in faculty capacity to prepare students for health and human services career entry
- Increase in student competency/preparedness for health and human services career entry

Strategic Objectives	Key Activities
1.4a: Support existing and create new forums and structures for academic-practice knowledge/information sharing and integration.	▪ Inventory current academia and practitioner knowledge sharing opportunities. ▪ Assess the degree of integration across schools including advisory boards, associate faculty, lecturers, student project collaboration, event participation, etc. ▪ Identify opportunities for increased academic-practice collaboration and integration across HHSA departments and CHHS schools. ▪ Develop and promote speaker's bureau for guest lecturers, panels, and workforce recruitment.
1.4b: Enhance the capacity of faculty and relevancy of curriculum to prepare students for entry into health and human services careers.	▪ Assess and define skills and competencies required to meet field expectations and competencies. ▪ Align existing curriculum and develop new curriculum aligned with field expectations and competencies. ▪ Support faculty with training and field experiences that inform teaching and learning. ▪ Create opportunities for academia-practice integration including scholars/practitioners in residence.

PRIORITY #2
RESEARCH & DATA EXCELLENCE

Annual
Epidemiology
Research
Exchange

INFORM AND IMPROVE ACADEMIA, POLICY, AND
PRACTICE WITH RIGOROUS AND RELEVANT RESEARCH

COLLABORATING ON RESEARCH AND DATA SHARING TO IMPROVE ACADEMIA, POLICY, AND PRACTICE

Conducting practice-based research and improving bi-directional data sharing are two powerful ways for any academic-practice partnership to contribute meaningfully to the health and human services field. Each collaborating partner has unique expertise, resources, and knowledge that, when combined, has the potential to significantly improve academia, policy, and practice while addressing persistent health disparities.

HHSA's eight service departments provide health and human services and support to one in every three San Diego County residents through more than 25 public facing facilities and over 350 contracted community service providers. The agency's mission is to make people's lives healthier, safer, and self-sufficient by delivering essential services to San Diego County. Due to the breadth of services and supports provided, HHSA has significant public health and social services data available for analysis and a need for rigorous research. Thus, HHSA has a long history of partnering with academic institutions, including SDSU, to conduct research and share data with the goal of informing and improving policy and practice.
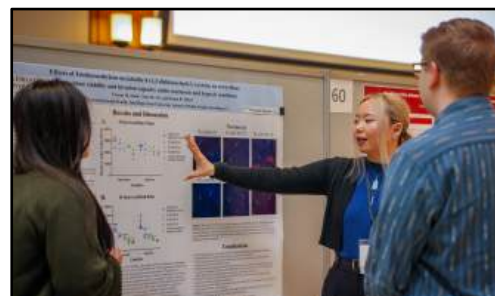
SDSU's S³ Student Research Symposium

Equally significant, SDSU has nearly 7,000 faculty and staff and close to 38,000 students with time, knowledge, and expertise to contribute to and collaborate on joint research and service projects. The College of Health and Human Services (CHHS) has approximately 300 faculty, researchers, and lecturers and more than 5,000 undergraduate and graduate students with a shared interest in contributing to the health and well-being of San Diego residents as well as helping to eliminate inequities in education, the workforce, and public health. Many of CHHS's faculty and students have existing research or are conducting new research that provides value to health and human services policymakers and practitioners, as well as the broader community.

LWCIL's intentional development of a Research and Data Excellence Subcommittee, co-chaired by leaders from HHSA and CHHS, sets forth a clear priority of collaborating on rigorous and relevant research to achieve greater impact with respect to education, workforce, and health equity. National research on Academic Health Department (AHD) partnerships supports that such partnerships are "well-positioned to address structural racism as a fundamental cause of health inequities, and they can also advance health equity from other marginalized and vulnerable populations, including LGBTQ+, impoverished communities of all races and ethnicities, and migrant and immigrant communities."[1]

HHSA and SDSU currently partner on joint research projects involving faculty, students, and practitioners and bi-directional sharing of knowledge and information. For example, the annual Epidemiology Research Exchange, SDSU's S[3] Student Research Symposium, CHHS's Research Day, and the Live Well Advance are all forums for connecting, sharing, and learning. Leveraging these existing structures and creating new and innovative opportunities will help to further infuse theory into practice and practice into academia.

The opportunity to co-produce, publish, and present rigorous research through a more formalized partnership provides significant benefit to the partners, the community, and the health and human services field overall. HHSA provides access to immensely valuable data, services, and communities. SDSU provides research capacity and expertise in the form of students and faculty as well as access to an Institutional Review Board (IRB), a structure required for protecting the rights and welfare of research involving human subjects. Examples of AHD's collaborating on scholarly research has proven to enhance teaching, strengthen curriculum, and improve practice.[2] Most importantly, joint research focused on health equity policies and services has influenced public and political will to champion and invest in programs, services, and innovative solutions that improve lives and strengthen communities.[3]

> ## PRIORITY #2 I RESEARCH AND DATA EXCELLENCE: INFORM AND IMPROVE ACADEMIA, POLICY, AND PRACTICE WITH RIGOROUS AND RELEVANT RESEARCH
>
> **Goal 2.1:** Ensure research and data sharing consistency, coordination, and innovation.
>
> **Goal 2.2:** Formalize and systematize processes and procedures to facilitate and catalyze research and data sharing.
>
> **Goal 2.3:** Co-produce rigorous research and high-quality publications that inform and improve academia, policy, and practice.

PRIORITY #2
RESEARCH AND DATA EXCELLENCE: INFORM AND IMPROVE ACADEMIA, POLICY, AND PRACTICE WITH RIGOROUS AND RELEVANT RESEARCH.

Goal 2.1: Ensure research and data sharing consistency, coordination, and innovation.

Measures of Success (Percentage/Number):
- Increase in each partners' awareness of respective research processes and procedures
- Increase in data set consistency across departments, schools, and partners
- Increase in research and data publication opportunities identified

Strategic Objectives	Key Activities
2.1a: Facilitate shared understanding of respective research and data sharing processes and procedures.	▪ Inventory and share current research, data sets, and data sharing priorities and practices. ▪ Identify opportunities to streamline, align, and support existing processes and procedures across CHHS schools and HHSA departments. ▪ Identify barriers to increased research and data sharing collaboration.
2.1b: Create a system for identifying and prioritizing opportunities for academia-practice research and data-sharing collaboration.	▪ Inventory and share current research and data sharing policies. ▪ Identify current and develop new structures to leverage bi-directional sharing of information, research, and data. ▪ Develop a formal process for LWCIL partners to identify research/data needs and opportunities.

PRIORITY #2
RESEARCH AND DATA EXCELLENCE: INFORM AND IMPROVE ACADEMIA, POLICY, AND PRACTICE WITH RIGOROUS AND RELEVANT RESEARCH.

Goal 2.2: Formalize and systematize processes and procedures to facilitate and catalyze research and data sharing.

Measures of Success (Percentage/Number):
- Increase in partners' awareness and understanding of respective data sharing procedures
- Increase in participation at forums and events
- Increase in research/data sharing collaboration
- Increase in innovative research/data sharing projects

Strategic Objectives	Key Activities
2.2a: Establish a research-focused Memorandum of Agreement (MOA).	▪ Review current research and data sharing agreements and identify opportunities for improvement. ▪ Create, review, and adopt a comprehensive MOA.
2.2b: Protect the rights and welfare of individuals by formalizing an Institutional Review Board (IRB) resource relationship.	▪ Share current IRB process. ▪ Formalized IRB relationship between HHSA and SDSU. ▪ Utilize IRB process to accelerate scholarly research.
2.2c: Create and communicate clear procedures for sharing data between schools, departments, and partners.	▪ Assess current practices in data sharing within and across partners. ▪ Identify issues and barriers with bi-directional data sharing practices. ▪ Develop a field guidebook for collaborative research.
2.2d: Convene partners to support research knowledge exchange and collaborative research innovation.	▪ Facilitate quarterly research knowledge exchange and innovation forums. ▪ Integrate academia and practice into existing knowledge sharing opportunities such as HHSA Health Equities Summits, SDSU & CHHS Research Days, and Live Well Advance. ▪ Integrate academia and practice into existing knowledge sharing opportunities such as HHSA Health Equities Summits, SDSU & CHHS Research Days, and Live Well Advance. ▪ Assess and leverage existing digital structures to facilitate research knowledge exchange and collaboration.

RESEARCH AND DATA EXCELLENCE: INFORM AND IMPROVE ACADEMIA, POLICY, AND PRACTICE WITH RIGOROUS AND RELEVANT RESEARCH.

Goal 2.3: Co-produce rigorous research and high-quality publications that inform and improve academia, policy, and practice.

Measures of Success:
- Increase in published scholarly articles
- Increase in high quality data publications
- Increase in co-presentations and panel participation
- Increase in funding to support scholarly research
- Increase in graduates participating in Summer Research Program
- Increase in competency of graduates in Summer Research Program

Strategic Objectives	Key Activities
2.3a: Create policies and procedures for co-research, co-publishing, and co-presenting.	▪ Research existing documents and guides that address expectation in producing and publishing collaborative research. ▪ Clarify expectations and requirements regarding joint authorship.
2.3b: Elevate regional and national awareness of equity issues and operational performance through data publications including case studies, white papers, and reports.	▪ Guide and inform policy development on use of behavioral, clinical, and other health data publication processes.
2.3c: Build capacity and align resources to support research and data excellence.	▪ Pilot academia-practice co-research and co-publication project. ▪ Establish Graduate Summer Research program. ▪ Identify new and existing resources to support joint research grant opportunities.
2.3d: Establish systems to track and report co-production, policy influence, rigorous academia-practice improvement, and data-driven decision making.	▪ Assess availability of relevant/needed data. ▪ Utilize existing or create data gathering and reporting systems and structures. ▪ Formalize tracking and reporting of data.

PRIORITY #3:
SERVICE TO COMMUNITY

INTEGRATE ACADEMIA, PRACTICE, AND COMMUNITY TO ADVANCE EQUITY AND ELIMINATE HEALTH DISPARITIES

ADVANCING EQUITY THROUGHOUT SAN DIEGO COUNTY IN PARTNERSHIP WITH COMMUNITY

San Diego County is one of the most desirable regions in the nation to live, work, and play. With a temperate climate, beautiful landscapes, and significant economic opportunity, it is home to more than three million people. In addition to these impressive attributes, San Diego County is recognized as a vibrant border region which contributes to its racial, ethnic, and cultural diversity.

As with any flourishing metropolitan area, the region is not without its challenges. U.S. News & World Report recently ranked San Diego as the most expensive city to live in the nation[1], making it increasingly difficult for many individuals and families to survive, much less thrive. According to the 2021 U.S. Census, 10.5% of the population lives in poverty[2], one of the key social determinants of health. Although this is below the state (12.9%) and national (13.9%) averages, some census tracts in the region have between 20-60% of families with children living in poverty.[3] This extreme poverty is shown to contribute to poor health, developmental, and educational outcomes in children as well as perpetuating generational poverty.[4] Further analysis shows that Black and Latino/a residents live in poverty at a higher rate than their White neighbors.[5]

Due in part to the rising cost of living in San Diego County, low wages, and the shortage of affordable housing, more than 10,600 residents are homeless, and many more are on the verge.[6] In fact, nearly 35% of residents struggle to make self-sufficient wages.[7] Furthermore, according to the County of San Diego, 42% of households are cost burdened, spending above 30% of their incomes on housing.[8] The stressors of poverty contribute to physical and mental health conditions and force families to redirect limited resources away from basic necessities such as healthy food, healthcare, and transportation.[9]

Representatives from SDSU, HHSA, and the Community came together for the LWCIL Launch

San Diego County's population, increasingly diverse, is already "majority-minority."[10] Approximately 23% of County residents are immigrants or refugees. The Hispanic population is continuing to grow as 37% of residents under the age of 18 are Latino/a.[11] With Hispanic, Black, Asian, Native American, and multi-race populations making up the majority, San Diego County benefits from such racial, ethnic, and cultural diversity. However, significant inequity exists with respect to health disparities. According to the San Diego Foundation, White San Diego residents are expected to live five years longer than the average Black

SDSU
San Diego State University

resident. Latino community members are four times less likely to have health insurance, limiting their access to vital health and well-being services.[12]

Lastly, the San Diego region has a rapidly expanding aging population. According to the California Department of Finance's population projections, there are approximately 710,000 residents age 60 or older with anticipated growth to exceed 850,000 by 2030.[13] The fastest growing age group in San Diego County is people aged 85 and older.[14] Ensuring mature adults have adequate access to quality health care, affordable housing, and support services is imperative.

The County of San Diego Health and Human Services Agency provides a variety of services, supports, and resources to individuals and families throughout the region. In order to do so, it contracts with over 350 service providers across the County. Significant effort is directed toward eliminating health disparities across racial, ethnic, socio-economic, and geographic divides. San Diego State University's faculty and students conduct research and collaborate on projects to improve health outcomes and influence policy change. By uniting forces in partnership with local communities, the two partners have the potential to significantly advance equity and contribute to the elimination of persistent health disparities. The intentional integration of academia, practice, and community to address community-defined needs and identified public health priorities has the power to

The Lab at SDSU's School of Speech, Language, and Hearing Sciences

inform and improve academia, policy, and practice while contributing to a healthy, equitable, safe, and thriving San Diego region.

PRIORITY #3 | SERVICE TO COMMUNITY: INTEGRATE ACADEMIA, PRACTICE, AND COMMUNITY TO ADVANCE EQUITY AND ELIMINATE HEALTH DISPARITIES

Goal 3.1: Utilize equity-focused data and community-defined assets and needs to inform collaborative priorities and decision-making.

Goal 3.2: Maximize and develop organizational and community structures to facilitate the integration of academia, practice, and community.

Goal 3.3: Evaluate impact to inform and improve practice, service delivery, and community outcomes.

COUNTY OF SAN DIEGO
HEALTH AND HUMAN SERVICES AGENCY

SDSU
San Diego State University

PRIORITY #3
SERVICE TO COMMUNITY: INTEGRATE ACADEMIA, PRACTICE, AND COMMUNITY TO ADVANCE EQUITY AND ELIMINATE HEALTH DISPARITIES.

Goal 3.1: Utilize equity-focused data and community-defined assets and needs to inform collaborative priorities and decision-making.

Measures of Success (Percentage/Number):
- Increase in advancing prioritized equity / health disparities issues
- Increase in academia-practice-community projects
- Increase in priorities set by data and community-informed assets and needs

Strategic Objectives	Key Activities
3.1a: Establish a process for monitoring data and community needs for emerging issues and opportunities for integrated impact.	▪ Assess available equity-related data sets and dashboards and prioritize those to consistently inform priorities and to continuously improve decision making. ▪ Review community needs assessments conducted by Regional Community Leadership Teams and identify opportunities to support and/or align with established and emerging priorities. ▪ Identify gaps and opportunities to collect needed data, improve access to existing data, or to assess community needs.
3.1b: Foster a culture of data- and community-informed decision-making supported by accessible, relevant data systems.	▪ Promote the importance and benefit of data- and community-informed decision-making. ▪ Educate and train partners in using data to remain focused, responsive, and proactive. ▪ Package relevant data to educate, inform, and engage partners and communities. ▪ Share data resources and systems for expanded use in decision-making.
3.1c: Build academic, practice, and community partner capacity to use data to set priorities, educate constituents, and measure impact.	▪ Leverage partner expertise in measurable impact frameworks to educate and improve access to data and data use competencies.

PRIORITY #3
SERVICE TO COMMUNITY: INTEGRATE ACADEMIA, PRACTICE, AND COMMUNITY TO ADVANCE EQUITY AND ELIMINATE HEALTH DISPARITIES.

Goal 3.2: Maximize and develop organizational and community structures to facilitate the integration of academia, practice, and community.

Measures of Success (Percentage/Number):
- Replicable academic-practice-community framework(s) in place
- Increase in academic-practice-community collaboration
- Improvement in prioritized health equity issue from Pilot(s)

Strategic Objectives	Key Activities
3.2a: Create a replicable framework for assessing opportunities, aligning resources for integration and innovation.	• Assess local and national best practices in academic-practice integration. • Research existing collective impact/results-based accountability/systems change frameworks. • Examine innovative models in equity/health disparities impact. • Synthesize learnings into a framework to be applied to Academic-Practice-Community Pilot(s).
3.2b: Elevate existing equity-aligned collaboration between HHSA and SDSU.	• Identify and assess replicability/expansion/promotion of current academic-practice-community collaborations.
3.2c: Leverage current organizational and community structures for increased academia-practice integration.	• Identify, assess, and prioritize existing structures within departments, schools, and the community.
3.2d: Develop at least one pilot integrating academia, practice, and community.	• Review data to support validity/necessity of pilot. • Assess interest and capacity of partners and community to support pilot. • Test and revise emerging framework(s) for defining and managing pilot.

SERVICE TO COMMUNITY: INTEGRATE ACADEMIA, PRACTICE, AND COMMUNITY TO ADVANCE EQUITY AND ELIMINATE HEALTH DISPARITIES.

Goal 3.3: Evaluate impact to inform and improve practice, service delivery, and community outcomes.

Measures of Success:
- Improvement in practice
- Improvement in service delivery
- Improvement in education, workforce, and/or health equity
- Improvement in health disparities

Strategic Objectives	Key Activities
3.3a: Collaborate across subcommittees and partners to engage expertise and align knowledge exchange and academia-practice improvement efforts.	▪ Identify opportunities for collaboration/integration across subcommittees. ▪ Identify opportunities for collaboration/integration across partners.
3.3b: Capitalize on current systems and structures for informing and improving policy, practice, service, and community outcomes.	▪ Assess current approaches to informing and improving policy and practice. ▪ Define processes and procedures for sharing progress and results. ▪ Coordinate efforts to inform and improve policy, practice and community outcomes.
3.3d: Establish systems to track and report impact of academic-practice-community integration activity.	▪ Define metrics/intended impact for each project/pilot. ▪ Utilize existing or create data gathering and reporting systems and structures. ▪ Formalize tracking and reporting of data.

PRIORITY #4
LEADERSHIP & SUSTAINABILITY

CREATE A NATIONALLY RECOGNIZED ACADEMIC-PRACTICE MODEL WITH INNOVATIVE LEADERSHIP COMMITTED TO IMPROVING ACADEMIA, POLICY, AND PRACTICE

PURSUING ACADEMIC-PRACTICE EXCELLENCE AND INNOVATION WITHIN SAN DIEGO COUNTY AND ACROSS THE NATION

A cross the nation, public health departments are partnering with academic institutions to leverage the best of what both have to offer in order to improve education, research, training, and service. This strategic integration of students, faculty, and practitioners, known as an Academic Health Department (AHD), has informed the vision and mission of the Live Well Center for Innovation & Leadership (LWCIL).

By definition, an AHD is a "teaching health department" created by a formalized and mutually beneficial partnership between one or more academic institutions and a public health department in which academia informs practice and practice informs academia.[1] Some of the benefits of such partnerships include real world experiences for students and faculty; scholarly research that informs the field, influences policy, and improves practice; greater efficiency, coordination, and effectiveness within and across partners; and increased equity, access, and excellence in health and human service delivery systems.[2]

The County of San Diego Health and Human Services Agency is an integrated model with eight departments administering services across the following areas: Public Health Services, Behavioral Health Services, Medical Care Services, Child and Family Well-being, Aging and Independence Services, Self-Sufficiency Services, Homeless Solutions and Equitable

LWCIL's Steering Committee connects with members of the community at the 2022 Live Well Advance

Communities, and Housing and Community Development Services. In addition, San Diego State University's College of Health and Human Services has six schools including Public Health, Social Work, Nursing, Exercise and Nutritional Sciences, Physical Therapy, and Speech, Language and Hearing Sciences. This unique breadth and depth of departments and schools provides the foundation for an innovative Academic Health and Human Services Department (AHHSD) committed to advancing education, workforce, and health equity.

Further informed by national research about AHDs, LWCIL's leadership has set out to build the requisite processes, procedures, systems, and "boundary-spanning" capacity necessary to create a highly

integrated, collaborative, and sustainable academic-practice partnership. Although the partners will pursue new resources and opportunities to achieve their aspiration of excellence and innovation within an AHHSD, much of what is envisioned is possible by simply strategically aligning and leveraging existing structures and resources. With committed and innovative leadership, an overarching memorandum of agreement, a jointly funded director position, established co-led subcommittees, and a multi-year roadmap now in place, LWCIL is poised for long-term success.

As LWCIL makes progress toward its aspiration of being a national model of excellence in academic-practice partnership within a San Diego region that is healthy, equitable, safe, and thriving, it will embrace its role and responsibility to challenge structural racism within academia and public health systems while promoting education, workforce, and health equity. Most importantly, LWCIL is committed to building a partnership that executes its mission by actively and authentically engaging communities to deliver positive results and powerful impact on the education, workforce, and health equity issues that matter most for San Diego County.

PRIORITY #4 | LEADERSHIP AND SUSTAINABILITY: CREATE A NATIONALLY RECOGNIZED ACADEMIC-PRACTICE MODEL WITH INNOVATIVE LEADERSHIP COMMITTED TO IMPROVING ACADEMIA, POLICY, AND PRACTICE

Goal 4.1: Build academic-practice model infrastructure to support shared leadership, collaboration, and accountability.

Goal 4.2: Develop, align, and enhance resources and capacity to support operations, integration, and impact.

Goal 4.3: Leverage collective knowledge, leadership, and relationships to improve academia, policy, and practice.

PRIORITY #4
LEADERSHIP AND SUSTAINABILITY: CREATE A NATIONALLY RECOGNIZED ACADEMIC-PRACTICE MODEL WITH INNOVATIVE LEADERSHIP COMMITTED TO IMPROVING ACADEMIA, POLICY, AND PRACTICE.

Goal 4.1: Build academic-practice model infrastructure to support shared leadership, collaboration, and accountability.

Measures of Success:
- Partnership charter in place
- Policies and procedures for subcommittees/work groups in place
- Baselines metrics established
- System for tracking and reporting in place
- Annual report produced

Strategic Objectives	Key Activities
4.1a: Construct operating procedures including decision making, partner representation, and roles and responsibilities.	▪ Document Steering Committee purpose, roles & responsibilities, and participant guidelines. ▪ Create policies and procedures for meeting management and decision-making. ▪ Write and adopt a comprehensive Partnership Charter
4.1b: Create policies and procedures for the development and management of subcommittees and workgroups.	▪ Analyze current subcommittees for process and procedures documentation and best practices. ▪ Scan for national models in committee structure policies and procedures. ▪ Draft policies and procedures for LWCIL subcommittees and workgroups.
4.1c: Establish baseline measures of success and develop systems for tracking and reporting progress and results.	▪ Produce annual report highlighting priorities, progress, and successes. ▪ Create dashboard of metrics informed by national, partner, and community data. ▪ Track and report progress and results.

LEADERSHIP AND SUSTAINABILITY: CREATE A NATIONALLY RECOGNIZED ACADEMIC-PRACTICE MODEL WITH INNOVATIVE LEADERSHIP COMMITTED TO IMPROVING ACADEMIA, POLICY, AND PRACTICE.

Goal 4.2: Develop, align, and enhance capacity and resources to support operations, integration, and impact.

Measures of Success (Percentage/Number):
- Increase in director embeddedness across partners
- Increase in aligned capacity including practitioners and scholars in residence
- Increase in aligned financial resources
- Increase is funded capacity
- Increase in joint grants / diversified funding

Strategic Objectives	Key Activities
4.2a: Define capacity needs and identify short- and long-term opportunities within and across partners for ongoing support and academic-practice integration.	▪ Review, align, and integrate jointly funded director position. ▪ Identify staff, faculty, and student positions for integration and/or support. ▪ Explore innovative capacity structures and resources.
4.2b: Align, attract, and diversify funding sources for capacity, integration, and impact.	▪ Develop a multi-year resource development plan. ▪ Engage existing grant / fund development resources within partners to monitor and pursue joint grant and funding. ▪ Assess and align existing financial resources.

PRIORITY #4
LEADERSHIP AND SUSTAINABILITY: CREATE A NATIONALLY RECOGNIZED ACADEMIC-PRACTICE MODEL WITH INNOVATIVE LEADERSHIP COMMITTED TO IMPROVING ACADEMIA, POLICY, AND PRACTICE.

Goal 4.3: Leverage collective knowledge, leadership, relationships, and infrastructures to improve academia, policy, and practice.

Measures of Success:
- Increase in awareness, understanding, and support of LWCIL among partners and key leadership
- Increase in online engagement and partner innovation/collaboration
- Increase in influenced policy change or improved academia and practice
- Increase in LWCIL's health and human services leadership/expert position

Strategic Objectives	Key Activities
4.3a: Increase awareness, understanding, and support for LWCIL among national and local leaders, partners, and communities.	▪ Develop a multifaceted internal and external communications plan including ongoing champion-building and engagement of SDSU, CHHS, and HHSA leadership. ▪ Identify key stakeholders for ongoing outreach and engagement. ▪ Assess community, health and human services field, and AHD network participation including meetings, events, and conferences.
4.3b: Catalyze connection, collaboration, and innovation between partners and with community.	▪ Evolve online presence and functionality to communicate vision/priorities as well as to facilitate engagement, knowledge sharing, and innovation. ▪ Leverage existing and create new opportunities for collaboration and knowledge/information sharing.
4.3c: Promote education, workforce, and health equity.	▪ Track and monitor priority equity and health disparities issues. ▪ Elevate expertise and results to influence academia, policy, and practice. ▪ Elevate expertise and results to build support of priority issues, community needs, and systemic change.

APPENDIX

APPENDIX A – ABOUT THE PARTNERS

The College of Health and Human Services is one of 10 colleges within San Diego State University. Other college highlights include:

- Prepares 4,400+ students for careers in health and human services
- Students provide more than 350 hours of community service annually
- Employs ~300 Tenured & Tenured Track Faculty, Researchers, and Lecturers
- Has six schools including: Public Health, Social Work, Nursing, Exercise and Nutritional Sciences, Physical Therapy, and Speech, Language and Hearing Sciences
- Offers 40+ Undergraduate, Graduate, and Doctoral Degrees
- Attracted more than $65 million in research funding in 21-22

The San Diego County Health and Human Services Agency provides vital health, housing and social services. Other agency highlights include:

- Directly serves 1 in 3 San Diego County residents
- Employs more than 7,800 health and human services workers
- Has eight departments including: Aging & Independence Services, Child & Family Well-being, Housing & Community Development Services, Homeless Solutions & Equitable Communities, Behavioral Health Services, Medical Care Services, Self-Sufficiency Services, and Public Health Services
- Contracts with more than 350 community service providers
- Oversees 25+ public facilities
- Administers operating budget over $2.8 billion

APPENDIX B – SPECIAL ACKNOWLEDGEMENTS

The vision for the Live Well Center for Innovation & Leadership began prior to the COVID pandemic through conversations between the leadership of San Diego County Health and Human Services Agency and the leadership of San Diego State University's College of Health and Human Services. In addition, several leaders who were involved in the Steering Committee have retired or pursued new endeavors. We would be remiss in not recognizing their ongoing and past contributions to the creation of LWCIL.

Special thanks to the following individuals for their ongoing and past leadership:

- **Adela de la Torre**, President, San Diego State University
- **Kimberly Evers**, Retired Director, Human Resources, County of San Diego Health and Human Services Agency
- **Steven P. Hooker**, Retired Dean and Professor, College of Health and Human Services
- **Nick Macchione**, Chief Health Officer, University of California San Diego and Former Agency Director, County of San Diego Health and Human Services Agency
- **Hala Madanat**, Vice President and Distinguished Professor, Division of Research and Innovation, San Diego State University
- **Eric C. McDonald**, Retired Interim Agency Director and Former Chief Medical Officer, County of San Diego Health and Human Services Agency
- **Wilma Wooten,** Retired Public Health Officer, Public Health Services, County of San Diego Health and Human Services Agency

APPENDIX C - STRENGTHS, WEAKNESSES, OPPORTUNITIES AND THREATS

STRENGTHS (Internal)		
HHSA	**SDSU**	**LWCIL**
▪ Student opportunities ▪ Alumni ▪ Grounded expertise ▪ Large workforce ▪ Committed workforce ▪ Live Well Vision Compelling ▪ Live Well brand ▪ Community Leadership Teams ▪ Established infrastructure ▪ Collaboration / Willingness to partner ▪ Strong partnerships (processes, agreements, and contracts) ▪ Powerful mission ▪ Access to funding ▪ Commitment to this work ▪ Workforce needs ▪ Longevity in San Diego County ▪ Strong reputation ▪ Connection to community ▪ Infrastructure to design and deliver ▪ Grantwriting	▪ Public access ▪ Strong reputation ▪ Students (social conscious commitment, and leadership) ▪ Established ▪ Niche content expertise ▪ Longevity in San Diego and health and human services ▪ Expansion / footprint ▪ Existing health clinics ▪ Existing community relationships ▪ Grantwriting ▪ Infrastructure to "test" and innovate ▪ Entrepreneurial spirit ▪ Research expertise ▪ Access to funding ▪ Cross-system relations ▪ Professional development capabilities	▪ Leadership support ▪ Solving an actual problem or issue ▪ Live Well brand ▪ Shared responsibility ▪ Unique value proposition ▪ Commitment to education, workforce, and health ▪ Co-investment ▪ Shared goals ▪ Existing agreements ▪ Existing collaboration between partners

WEAKNESSES (Internal)		
HHSA	SDSU	LWCIL
- Changing leadership - Slow pace of change - Bureaucracy - Siloed departments - Reduced and/or Changing Funding - Limited Time / Capacity - Competing priorities - Internal political climate - Human resources process slow and overly complicated - Lack of awareness about partner - Lack of agency-wide understanding of benefit - Need for coordination/consistency across departments	- Changing leadership - Slow pace of change - Bureaucracy - Siloed schools - Aging workforce - Time – support and incentives for new partnerships - How to get to where we want to go - Infrastructure to support partnership - Lack of awareness about partner - Faculty independence (respect and alignment) - Limited student time - Flexibility of student time - Need for coordination/consistency across schools - Lack of awareness of resources outside of college	- Limited capacity - Limited embeddedness across partners - Lack of dedicated infrastructure - Having to bridge mindsets and cultures of two very different organizations

OPPORTUNITIES & THREATS (External)	
Opportunities	Threats
- Changing health and human services environment - Artificial Intelligence (AI) - Funding for priorities - Philanthropy (reward established partnerships) - Dissemination of knowledge, learning, and experience - Awareness of HHSA services - Equity/Justice focus inspiring (students, faculty, and public) - Support and momentum nationally for Academic Health Departments (AHDs) - Shared community partners - Collaborations and momentum among community partners - Interest and support of Live Well community partners	- Political climate / election / future political trends - Focusing on "what is" vs. "what will be" - Disasters (Health, Social, and Environmental) - Economic climate (Reduced local, state, and federal funding) - Decreasing student enrollment, impact on sub-populations - Public value of education - Changing population - Wages not keeping pace with cost of living - Rising minimum way impact on operations/business - Public sentiment for prioritize issues - Aging workforce impacting priorities and contributing to loss of knowledge

APPENDIX D – GLOSSARY OF TERMS

Advance(s) – Terminology used to describe a "forward visioning" retreat or convening of community partners such as the annual Live Well Advance or the LWCIL Steering Committee Advance.

AHD – Acronym for Academic Health Department, a formal partnership between one or more academic institutions and a public health department or agency.

AHHSD – Acronym for Academic Health and Human Services Department, a formal partnership between one or more academic institutions and an integrated public health and human services department or agency.

Boundary-Spanning – People who move between the academic-practice partners. For example, faculty in residence, practitioners in residence, jointly funded positions and/or student workers.

CHHS – Acronym for San Diego State University's College of Health and Human Services.

Community – In the context of this document, unless otherwise stated, community refers to local communities and/or community residents outside of the university or health and human services agency.

Competent – Informed by the Core Competencies of public health professionals, "competent" refers to the desired foundational and crosscutting knowledge and skills, including cultural competency, desired of professionals engaging in public health practice, education, and research.

Diverse – In the context of this document, diverse refers to Black, Indigenous, and People of Color (BIPOC), first-generation, economically-disadvantaged, and LGBTQ+ populations who are traditionally underrepresented in education and the workforce, especially with respect to the field of health and human services.

Equity – In the context of this document, equity refers to education, workforce, and health equity which are central to LWCIL's mission and priorities.

Equitable – Refers to the fair and just distribution of resources based on need, not equal distribution of resources.

Health Disparities – According to the National Institute for Minority Health and Health Disparities, a health disparity is a health difference that adversely affects disadvantaged populations in comparison to a reference population, based on one or more health outcomes.

APPENDIX D – GLOSSARY OF TERMS continued

HHSA – Acronym for the County of San Diego Health and Human Services Agency

LWCIL – Acronym for The Live Well Center for Innovation & Leadership

Partners – Unless otherwise stated, the use of partners refers to San Diego State University and the County of San Diego Health and Human Services Agency.

Practice-based experiences – Refers to learning from experience during placements within health and human services organizations including HHSA, and community settings. The provided learning opportunities aid in student development by enabling the application of academic theory to workplace practice while developing desired and required skills and competencies.

SDSU – Acronym for San Diego State University

Workforce – In the context of this document, workforce represents all workers within health and human services including entry-level staff, managers, and leadership. Within academic settings, workforce is meant to encompass faculty, staff, and leadership.

CHHS students learn about HHSA career opportunities at SDSU's Public Health Career Fair.

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Leadership & Sustainability

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