

# Practical and Affordable Ways to Cultivate Leadership in Your Organization

Joyce R. Gaufin, Kathy I. Kennedy, and Ellen D. Struthers

---

Leadership can be cultivated through the intentional actions of managers and others in public health organizations. This article provides a rationale for taking innovative and proactive steps to build leadership, discusses four general strategies for doing so, and presents seven practical, creative, and affordable actions that can have a positive influence on efforts to cultivate leadership qualities in the public health workforce. Each action is illustrated with an actual contemporary example from a local public health agency. The actions include providing formal or informal coaching/mentoring opportunities; assigning staff to lead new projects or collaborations, projects outside their disciplines, projects that cause growth in their information technology capacity, or orphan or struggling projects; facilitating a book club; and institutionalizing reflection. The best way to ensure that effective leadership is available when the organization needs it is to intentionally develop it through an ongoing process. Leadership growth can be supported during the ordinary course of business in a public health organization through thoughtful challenges, sharing ideas and experiences, and especially through the example set by managers and those in positions of authority.

**KEY WORDS:** development, leadership, management, mentoring, workforce

One of the 10 Essential Services of Public Health is to “assure a competent workforce,”<sup>1</sup> which includes persons with public health leadership competencies.<sup>2</sup> There are National Public Health Performance Standards to measure the promotion of leadership at all levels within organizations that comprise the public health workforce.<sup>3</sup>

Assuring a competent workforce—and effective leadership within that workforce—is not a trivial matter; most state and local public health agencies face serious challenges in training and retaining their workforce. One of the areas of greatest concern is the “graying” of the workforce. By 2012, over half of the workforce in some state health agencies will be eligible to retire. In addition, some states may have 14 percent turnover rates and vacancy rates as high as 20 percent in key positions.<sup>4</sup>

These figures indicate the need for *succession planning*. Positions of leadership and authority will need to be filled because of normal attrition and planned organizational changes as the baby-boomer generation enters planned retirements. Unless leaders are groomed now, organizations will lose institutional memory, and there will be fewer capable mentors and coaches for the remaining workforce.

Cultural, gender, and age *diversity in the workforce*, especially in leadership positions, ensures the robustness and flexibility needed to weather the inevitable changes and challenges in public health agencies. There are four generations in the workforce today.<sup>5</sup> While it is sometimes challenging to get these generations to harmonize, the strength that their age and cultural

---

The authors claim no conflict of interest regarding the production of this article.

The authors thank the public health practitioners, named within, who generously provided their time and inspiration when sharing their leadership stories. Partial support was provided by the Centers for Disease Control and Prevention grants 5U14WC000113-02 and 5U14WC000111-02.

**Corresponding Author:** Joyce R. Gaufin, BS, Great Basin Public Health Leadership Institute, 646 N Pinion Hills Dr, Dammeron Valley, UT 84783 (Jgaufin@healthinsight.org).

---

**Joyce R. Gaufin, BS**, is Executive Director, Great Basin Public Health Leadership Institute, Salt Lake City, Utah.

**Kathy I. Kennedy, DrPH, MA**, is Director, Regional Institute for Health and Environmental Leadership, University of Denver, and Associate Clinical Professor, Community and Behavioral Health, Colorado School of Public Health, University of Colorado, Denver.

**Ellen D. Struthers, BA**, is Writer and Editor, Regional Institute for Health and Environmental Leadership, University of Denver, Denver, Colorado.

### BOX 1 ● Reasons to cultivate leadership in the organization

- *Succession planning*: Ensure that employees are recruited and developed to fill each key role within your organization.
- *Build diversity*: Value employees for the unique qualities and perspectives that they bring to the organization.
- *Learning organization*: Create a culture in which people learn together to develop the future of the organization.
- *Bench strength*: Ensure the competence and availability of employees ready to assume leadership responsibilities.
- *Surge capacity*: Increase capacity to expand beyond normal operations due to any type of emergency.
- *Job satisfaction*: Provide opportunities for growth and learning to increase employee fulfillment and fuel their passion for work.
- *Worker retention*: Offer a stimulating work environment with multiple career options and growth potential.
- *Worker recruitment*: Attract employees with an environment in which there are opportunities for meaningful work and personal development.

diversity brings to the organization is a valuable asset as public health agencies serve multigenerational, multicultural populations. Supporting new leaders with new ideas also helps an agency function as a *learning organization*—an entity that creates its own future rather than simply reacting to contemporary events.<sup>6</sup>

The public health leadership team needs to have strong backup in order to succeed. As those who manage professional athletic teams have learned, *bench strength* helps keep top performers sharp, and provides backup for essential functions, especially if it is done as cross-training. This can also create the *surge capacity* needed for emergency/disaster preparedness without adding staff within public health agencies.

*Job satisfaction* leads to the *retention of workers* and gives an agency a reputation as an exciting and future-oriented culture that facilitates the *recruitment of workers*.<sup>7</sup> It is clear that cultivating leadership is inextricably linked to ensuring a competent workforce on two levels. Current public health leaders need to use their positions to sustain organizational cultures that (1) actively plan for succession and (2) cultivate leadership among their protégés (Box 1).

### ● Strategies for Cultivating Leadership Within the Workplace

#### Support leadership growth through leadership training

Formal public health leadership development programs<sup>8</sup> can result in profound personal and professional growth. Periodically during a career, a

public health professional should seek a structured leadership learning opportunity. Public health leadership development programs facilitate the acquisition of leadership language and self-knowledge, which increases confidence and the willingness to take on new challenges.<sup>9</sup> When an employee has participated in a structured leadership development program and returns to the fertile ground of an organization with a leadership culture, the value of the formal training experience is a multiplier. The worker returns to a leadership learning laboratory where they can try out the new ideas and skills to which they were introduced.

Rowitz<sup>10</sup> encourages individual leaders to think of their careers *ecologically*, that is, to realize that they will need leadership training at different times in their professional careers to acquire new perspectives and address new problems that will arise. The ecological model of leadership also recognizes that the process for developing leadership is shared by the organization and the employee.

#### Support leadership growth through challenges and opportunities

An organizational culture that supports leadership continuously encourages new endeavors. It encourages workers to try out new ideas and to take calculated risks under the guidance of a supervisor. The practical and affordable actions described below illustrate ways to add value to individual employees in an ongoing way. Increasing an individual's capacity to lead should be an incidental process—one that is always in place. Each time workers accomplish something they have never done before, the organization becomes stronger and more vibrant, and workers become more prepared to fill positions of authority.

Employees who accept challenges rise to the occasion, often exceed expectations, and build self-confidence. Opportunities to lead are stimulating and rewarding and can cause newfound excitement and passion about work. Feed the passions! Nothing motivates like an internal passion.

Ensure that opportunities for development are in place during routine performance reviews—if unsure how to challenge an employee, ask them for ideas. Give as many people as possible an opportunity to develop their leadership abilities.

Organizations have compressed their hierarchical structures. Movement forward may now require developing an increased number of lateral opportunities rather than the traditional “climbing a corporate ladder”; there just are not that many rungs anymore. The actions described below can increase leadership capacity within a position.

## Support leadership growth by sharing ideas and experiences

The organization learns and creates a better future because of the infusion of new ideas, and individuals grow harder than if they kept their ideas to themselves.

Book clubs, for example, can grow leadership in many ways. Interpreting the literature together vis-à-vis work-related challenges can inspire leadership actions. When a book of the year is assigned for all employees to read, a shared language is acquired, giving people permission to talk together about the concepts and helping them think differently. Finally, when book discussions (or any dialogues) are facilitated in a truly safe environment, the interpersonal culture can be transformed into one of mutual support where risk taking is encouraged.

Not only can staff share what they have learned in formal trainings but the practice of debriefing successes and failures can be established. Working professionals often feel compelled to debrief when things go awry but neglect to adequately take stock at times of success. Articulating both kinds of lessons can help maximize the likelihood of building upon what works.

A great mentor can produce a fountain of ideas, and coaching can facilitate the reflection that is the hallmark of a leader. Peer coaching is a double bargain: once employee coaches are trained, peer coaching is free and grows two people at the same time.

## Support leadership growth by example

Top-level leaders must personally demonstrate their commitment to leadership development by honing their leadership skills and letting others know that they are doing this. Perhaps the least expensive and easiest thing that a manager can do to cultivate leadership in others is to model it. Show others how to lead through your's own actions. Let others see you learn from your successes and failures, take on new challenges, give positive feedback as well as constructive criticism, and give credit. Let others watch you seek out your own peer group for ideas and support; share your own development goals and plans with them; cultivate your own coaching and mentoring skills. To facilitate lifelong leadership learning in others, leaders need to practice it themselves.

It has never been more critical to recognize and inspire leadership actions in the public health workforce. Public health leaders can do this easily and inexpensively. "Observing others' successes can show us new possibilities, expand our thinking, [and] trigger our creativity."<sup>11(p21)</sup>

## ● Seven Practical and Affordable Actions Implemented by Local Public Health Agencies

The seven practical and affordable actions described below illustrate the four general strategies for cultivating leadership discussed earlier. All of the seven illustrations are the work of public health professionals who have participated in formal leadership development programs. These seven examples do not constitute an exhaustive list of actions that can cultivate leadership but suggest the range of viable measures that can be implemented easily. The following examples have not been evaluated or rated in any way, but they do represent examples of innovative leadership practices.

### Provide formal or informal coaching/mentoring opportunities

Patricia Dobbins, Executive Director of the Hendry and Glades County Health Department in Florida, believes that mentoring programs should be in place early in anyone's career and encourages her directors to participate in the all-volunteer mentoring program she has implemented in her department.

Believing that the best mentoring programs involve the protégé actively seeking a suitable mentor for themselves and that the mentor's professional expertise be outside the protégé's field, Dobbins regularly coaches her directors through the process of finding a mentor. Starting with brainstorming, the team learns to use their extended networks to gather names of people in positions of authority in the community. Dobbins then asks those leaders whether they would be willing to mentor someone who works in public health. Fortified with information on potential mentors, it then becomes the responsibility of the employee to make contact and establish a professional mentoring relationship.

Dobbins' process is simple and eloquent and is readily adaptable by any public health agency. The benefits for both employees and community are multiplied by the power of the expanded network for all.

### Intentionally assign staff to lead new assignments, projects, or collaborations

Jill Kidd, Director of Nutrition Services for Pueblo City Schools in Colorado, realized that her staff was no longer functioning to their full potential as a team; they had worked in the system for nearly 20 years and productivity had flattened.

Wanting to turn the dynamic around and focus their energy into creating a productive work environment, Kidd assigned the team direct responsibility for the

complex, yearlong project of revamping the school district's menus and recipes. Assigning this task to her staff meant that Kidd would have to delegate and advise as a leader instead of managing the entire process.

Taking ownership of the huge project reunified the Pueblo City Schools staff. Facing the responsibility of defining all the elements needed to make the system changes in accordance with the myriad of federal guidelines, the staff quickly learned to use the resources within their team—recognizing and encouraging each other's individual strengths. They not only learned how to articulate what they needed from their leader but also, when the time came to include their subordinates in the process, they imitated Kidd's skill at managing and leading staff. Everyone learned how capable they were at taking on a complex task and leading the way in delivering a successful final product.

### **Intentionally assign staff to assignments outside of their disciplines so they can acquire knowledge about a related field and new ways of thinking**

With the encouragement and support of his supervisor, Richard Cox, Communications Director for the Health District of Northern Larimer County in Colorado, engaged in a project that represented a completely new direction for him. Concerned about the impact the health insurance crisis was having on the agency's clients, he wanted to broaden the scope of his duties and take action on behalf of the community.

With community outreach in mind, Cox designed a feasibility study on establishing a Web-based health insurance ombudsman-type service for the people in his health district. His vision was to provide a volunteer expert for individuals to contact when needing help understanding and negotiating their healthcare/health insurance system. Passionate about what this service could mean for the community, and committed for the long-term, Cox sought and received permission to continue pursuing and developing the plan in addition to his existing duties. To hold himself accountable to his employer, he added the work to his performance goals and annual review.

Pushing himself out of his comfort zone, combined with his supervisor's willingness to add his expanded goals to his performance review, has given Cox a renewed sense of efficacy, and it is personally gratifying for him to have his outside interests validated by his support system at work.

### **Intentionally assign non-IT staff to incorporate and manage new technologies**

Ron Lund is an environmental health supervisor for the Salt Lake Valley Health Department in Utah. As a food

safety specialist, Lund is not an information technology person. But when his health district decided to make the food services and restaurant quality information public on the Web, he eagerly accepted the chance to spearhead the project.

Taking on the Web site development project was a huge challenge. Lund had never done any Web development and did not speak Web language. In collaboration with his team, Lund collected the data, designed the scoring system for restaurants in accordance with the inspection information, and decided how the Web pages would look.

Working through the IT learning curve and Web site development reinvigorated Lund and introduced him to all manner of new experiences. In addition, throughout the project, Lund had opportunities to actively exercise his leadership skills. Already an efficient manager, Lund added the roles of teacher and mentor to his team project; he was there to open his mind to the ideas of others, offer guidance, point out where he saw the project needed to go next, and facilitate new opportunities for the team members. Cross-fertilizing two disciplines resulted in professional growth all around.

### **Intentionally assign those who need a challenge to an orphan or struggling project**

The responsibility of deciding how the Jefferson County Public Health Department in Colorado would commemorate its 50th anniversary fell to division directors Beth Lipscomb and Elise Lubell. Lipscomb says they used the celebration to energize the entire department and cultivate leadership qualities in employees whose positions seldom allowed them to lead new projects.

Lipscomb and Lubell appointed a "Dream Team" by flipping the hierarchy and handpicking a person from each division in whom they saw potential for leadership. Once in place, the Dream Team created an innovative plan: celebrate throughout the year by holding six, differently themed, community outreach events, effectively creating six concept groups. Each supervisor was asked to join at least two concept groups, and all employees were asked to join one or more concept groups of their choosing. With the full support of the executive director, the rules for joining were strict—there could be no negative repercussions for not joining a group or for joining too many! Once the groups were formed, Lipscomb and Lubell stepped back and let the Dream Team take charge.

The results of this innovative plan were overwhelmingly positive. For example, one event, in honor of Earth Day, was a recycling and park clean-up day during which more than 50 employees partnered with members of the community and the county commissioners.

In addition, the Dream Team thrived in their roles as leaders; cohorts from different divisions worked together on a common goal—overcoming the inevitable silos; supervisors learned they had subordinates who were inventive and strong team players; and a project that might have remained an orphan became the party everyone wanted to attend.

### Facilitate leadership book clubs at the worksite

When Mercedes Harden was a senior staff member at the El Paso County Department of Health and Environment in Colorado, her director, Rosemary Bakes-Martin, was passionate about *encouraging the hearts* of her staff as the key method for developing strong leaders.<sup>12</sup> Bakes-Martin believed this could best be accomplished in a work environment where relationships among staff were important and creative ideas could flourish.

Her solution for combining these elements was to start a book club. All staff members were welcome to join the monthly informal meetings. The group chose the book to read and the job of leading the discussion rotated to the next volunteer. In their discussions, they drew analogies from the book's themes, characters, and/or plot lines to the complex issues they faced personally and professionally in the public health arena.

Employees were empowered by the open discussions and learned that underneath the efficient, professional personas were compassionate colleagues. Harden says that the result of these discussions was to open the doors of communication and break down barriers between and among teams and internal departments, creating a culture in which collaboration became the norm.

### Institutionalize and learn together through reflection as part of team and individual debriefing

LaPriel Clark, Director of Nursing and Community Services at the Bear River Health Department in Logan, Utah, believes their agency to be a *learning organization*.<sup>6</sup> As an agency, they are committed to cultivating an atmosphere where leadership and other skills are learned, talked about, and utilized. Whenever the department sends a manager to a formal training program, that manager meets with senior staff to reflect and talk specifically about what concepts were taught so that all can learn about the ideas and incorporate them into their work.

The department believes that sharing ideas is the most valuable way to learn new concepts. The open discussion also helps management decide which concepts will be most valuable in each department. Learning together in this way demonstrates the shared responsi-

### BOX 2 ● Practical and affordable strategies to build leadership in an organization

1. Be instrumental in finding mentors to support your staff.
2. Learn to delegate and take on an advisory role.
3. Try a new direction to reinvigorate your goals and performance.
4. Embrace new technologies as a way to reach your communities.
5. Create a lateral avenue for employee growth and development.
6. Read together about leadership practices from formal and informal sources.
7. Learn and practice leadership skills together.

bilities they feel for developing employees and raising performance.

The director of the department supports innovation and the department has become an active laboratory in which the prevailing theme is “What are you learning now?” This mantra has made a positive difference in employee retention and has been particularly important during tight financial times (Box 2).

### ● Conclusions

The accelerating pace and expansion of the public health agenda render the words of the Institute of Medicine never more true: “the need for leaders is too great to leave their emergence to chance.”<sup>13</sup> At a time when agencies are facing tremendous challenges, from the ever-increasing average employee age to continually shrinking budgets and increased demands on the public health system nationwide, it has never been more critical to recognize and cultivate leadership qualities in the public health workforce. The rationale for engaging in intentional actions to build leadership in public health practice is clear and strong, and the best way to ensure that effective leadership is available when the organization needs it is to intentionally develop it through an ongoing process. Excellent outcomes arise from departments where leadership development is a shared responsibility and collaboration is the preferred mode of operation. Cultivating a work environment where emergent leaders have avenues for learning and practicing leadership skills can be a creative and low- to no-cost endeavor and can be supported during the ordinary course of business in a public health organization through thoughtful challenges, sharing ideas and experiences, and especially through the example set by managers and those in positions of authority.

### REFERENCES

1. Harrell JA, Baker EL, the Essential Services Workgroup. The essential services of public health. *Leadership Public Health*. 1994;3(3):27–31.

2. Wright K, Rowitz L, Merkle A. A conceptual model for leadership development. *J Public Health Manag Pract.* 2001;7:60–66.
3. Centers for Disease Control and Prevention. *State Public Health System Performance Assessment Instrument. National Public Health Performance Standards.* [http://www.cdc.gov/od/ocphp/nphpsp/documents/State\\_v\\_1.OMB\\_0920-0557.pdf](http://www.cdc.gov/od/ocphp/nphpsp/documents/State_v_1.OMB_0920-0557.pdf). Published 2005. Accessed December 23, 2009.
4. Association of State and Territorial Health Officials. 2007 state public health workforce survey results. <http://www.astho.org/pubs/WorkforceReport.pdf>. Published 2008. Accessed July 29, 2009.
5. Zemke R, Raines C, Filipczak B. *Generations at Work: Managing the Clash of Veterans, Boomers, Xers and Nexters in Your Workplace.* New York, NY: AMACOM; 2000:19.
6. Senge PM. *The Fifth Discipline: The Art and Practice of the Learning Organization.* New York, NY: Doubleday; 1990:14.
7. Up next: Generation change and the leadership of non-profit organizations; executive transitions monograph series, Vol 4. Annie E. Casey Foundation; Evelyn and Walter Haas Jr, Fund; 2005:4. <https://folio.iupui.edu/bitstream/handle/10244/107/LD2928K643.pdf?sequence=1>. Accessed December 23, 2009.
8. St Louis University. National public health leadership development network. <http://www.heartlandcenters.slu.edu:16080/nln/program.html>. Accessed December 23, 2009.
9. Olson L. *Leadership Development for Public Health and Environment* [dissertation]. Denver, CO: University of Denver; 2005. [http://rli.uchsc.edu/rli/pub/olson\\_dissertation.cfm](http://rli.uchsc.edu/rli/pub/olson_dissertation.cfm). Accessed July 28, 2009.
10. Rowitz L. Public health leadership development 2010: a seamless approach for the future. *Leadersh Public Health.* 2008;8:2–4.
11. Wheatley MJ, Kellner-Rogers M. *A Simpler Way.* San Francisco, CA: Berrett-Koehler Publishers Inc; 1999:21.
12. Kouzes J, Posner B. *The Leadership Challenge.* 4th ed. San Francisco, California: John Wiley & Sons Inc; 2007:21–22.
13. Institute of Medicine. *The Future of Public Health.* Washington, DC: National Academies Press; 1988:6.