

**APHA TASK FORCE ON ASSOCIATION AND ORGANIZATIONAL IMPROVEMENT
(TFAIR)**

2007-2008 Report and Recommendations

October 2008

TFAIR Members 2007-2008: Glen Bartlett, Leatrice Berman-Sandler, Diana Conti, Elsie Eyer, Howard Eng, Joyce Gaufin, Nell Gottlieb, Paul Halverson, Lisa Maldonado, Celia Gomes McGillivray, Marvin Rubin, Andrea Taylor, and Andrew White (Chairperson). APHA Staff Liaison: Ida Plummer

Attached is the final report of the APHA Task Force on Association and Organizational Improvement (TFAIR). It includes 10 recommendations in three strategic areas and four appendices. Appendix A lists all members who have served on the TFAIR since its inception in 2001. Appendix B lists historical documents that chronicle TFAIR's accomplishments and a link to the TFAIR page on the APHA website where they are accessible. Appendix C is the survey that TFAIR did in Fall 2008 to get feedback from members on organizational issues, and Appendix D contains tabular and graphical results from the survey. TFAIR has also worked with the Bylaws Committee to draft a motion regarding the representation of Caucuses as non-voting members of the Governing Council. Pending resolution of legal issues regarding the motion, this will be brought forward by the Bylaws Committee.

Since TFAIR was constituted, it has fostered a number of structural changes within APHA. These TFAIR motions passed by the Governing Council in 2005 include signing of Memoranda of Understanding between Caucuses and APHA, Multi-unit Membership, and definitions and setting of criteria for Sections, Special Primary Interest Groups, and Forums. All of these have been implemented by APHA, the EB, the ISC and staff.

We wish to thank the Executive Board, Governing Council, Intersectional Council, and staff who have worked with us across the years.

Respectfully,

Andrew A. White, MPH, PHD
TFAIR Chair, 2007-2008

TFAIR 2008 Final Recommendations
Submitted to the American Public Health Association Governing Council
Annual Meeting, October 2008

The following recommendations are divided into three strategic areas: (I) effective use of Governing Council (GC) in APHA decision-making; (II) alignment among APHA units with organizational goals; (III) overall effectiveness of APHA.

Evidence Base for the recommendations in this report: Previous TFAIR GC roundtable responses in 2003, 2005, 2007; comments from EB, COA, and ISC leaders and members over the life of TFAIR.

Strategic Area I - Recommendations related to effective use of GC in APHA decision-making

Problem Statement: The GC is not able to provide adequate input to the important strategic issues facing APHA (organizational issues) and public health (policy issues). Effective management of GC time, agendas, and decision-making processes is essential for this to occur.

TFAIR Recommendation 1

Continue to develop mechanisms to make GC meetings more strategically focused and improve GC input on APHA organizational and policy issues. For example, focus the GC agenda around strategic issues; prioritize agenda items by strategic importance and highlight these issues in advance for GC members and APHA members; prioritize action items over routine and descriptive reports (which could be handled by phone call or via email).

TFAIR Recommendation 2

Continue to explore new ways to improve GC deliberations and decision making and to assure adequate preparation by membership units on GC action items prior to formal GC decision-making. For example, consider the use of break-out group discussions to enhance deliberation and decision making process; review and revise the APHA meeting schedule to afford the opportunity for membership units to meet before GC; provide GC action agenda to leadership of represented units to minimize surprises and develop a transparent, inclusive culture.

TFAIR Recommendation 3

Develop the leadership and coordination function within the GC to focus GC agendas strategically and prioritize and maximize the efficient and effective use of GC time.

Strategic Area II - Recommendations related to alignment among APHA units with organizational goals

Problem Statement: For APHA to function effectively, it is essential to improve alignment around the strategic map, accountability between membership and governance units, and synergy and cohesion among units. This will help conserve volunteer and staff energy and resources and sharpen our focus on reaching APHA-wide goals to affect public health policy in the nation.

TFAIR Recommendation 4

To increase understanding and facilitate more effective participation in APHA, **educate members more effectively about the function and relationship of governance units and the governance roles and opportunities of all respective parties (individual members, membership units, unit leaders, all Boards and Committees, GC, and Executive Leadership)**. Review existing materials explaining APHA governance and revise or create new materials to improve efficacy and transparency and to make it obvious how, where, and when to get involved to obtain “traction” as a volunteer (e.g., web-based materials and training); develop easier ways for membership to access existing and new materials and make the availability of such materials prominent on the “about APHA” members web page.

TFAIR Recommendation 5

Maximize the relationship between EB, ISC and the sections through the liaison function and other mechanisms.

TFAIR Recommendation 6

APHA works best when all the units are working together. Each membership unit, the EB, ISC and COA should identify actions to support, refine, and carry out the strategic plan.

TFAIR Recommendation 7

Simplify and improve strategic communication across all levels of APHA. For example, uncouple critical items from omnibus communications by sending short emails from the Executive Director to membership identifying successes, noting important coalition or executive actions taken, and calling for input on specific issues to enhance a feeling of inclusion and pride in APHA; and establish semi-annual EB Zoomerang surveys to the membership and volunteer leaders to solicit input on organizational or policy priorities and to evaluate member satisfaction or concern.

TFAIR Recommendation 8

APHA and its units should develop initiatives to collect feedback on organization performance and effectiveness.

Strategic Area III - Recommendations related to overall effectiveness of APHA

Problem Statement: APHA has made great strides in recent years with a stable and effective Executive Director, increased transparency, development of a strategic map, a renewed focus on advocacy, and improved organization of membership units, but is still described by active members as a Byzantine organization. There is a clear need for increased efficacy if APHA is to achieve the outcomes expressed in the strategic map while competing for resources and attention in a very developed field of organizations.

TFAIR Recommendation 9

Improve advocacy by (1) expanding APHA’s capacity to implement its policies; (2) developing more frequent policy reports, briefs, and white papers on public health and health policy issues; (3) improving and measuring advocacy impact and outcome; and (4) being more aggressive on the policy front. APHA should seek to expand funding of the APHA Policy Center and hire more staff to obtain “critical mass” in policy analysis, lobbying and coalition work; provide more timely and more frequent analysis of health issues from the public health perspective; cultivate more involvement from and disseminate policy more frequently to local affiliates and sections, SPIGs, and caucuses; structure APHA so that it can respond more effectively to regional issues, legislative issues, and media treatment of news having public health importance; better utilize member expertise; replace Action Board with a smaller Advisory Board directed to advise and assist in the development of the Policy Center and to establish its priorities. If we can successfully achieve governance and procedural efficiencies (see Strategic Area II), savings in resources (specifically in volunteer and staff time and effort), could become available to reprogram toward implementing a stronger and more nimble advocacy function within APHA.

TFAIR Recommendation 10

The following are **persistent systemic issues that have emerged in feedback to TFAIR from membership and must be addressed by APHA.**

- a. **Develop structural change alternatives to achieve improved function** by (but not limited to): (1) reviewing whether the current bylaws draw effective lines of non-overlapping authority and accountability between EB and GC with regard to governance; (2) reviewing GC size, function, and effectiveness (see problem statement in Strategic Area I) while maintaining priorities for diversity, representation, and inclusive democratic debate; (3) reviewing EB size, composition, elected vs. appointed status, tenure of membership; and (4) reviewing roles and efficacy of existing boards and standing committees; (5) reviewing decision and action pathways with an eye toward identifying and eliminating any overlapping responsibilities and greatly reducing the number of sequential review and approval processes to improve timeliness of decisions and actions.

- b. **Assess cost/benefits of current governance structure and operations in staff and volunteer time and opportunity costs**, paying particular attention to opportunities to reduce procedural bottlenecks and unnecessary complexity in critical paths.
 - c. **Assess cost effectiveness and performance of potential new governance and procedural options.**
 - d. **Craft an appropriate transition plan to a more effective governance model that includes a communication plan for developing widespread membership understanding and support.**
 - e. **Present alternatives through APHA decision-making process.**
 - f. **Identify needed changes to organizational governance documents.**
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