

DEI Recommendation and Budget Request

DEI Recommendation and Budget Request Survey

Page description:

In partnership with the Office of the Secretary, the Office of Health Equity (OHE), the Health Equity, Diversity, and Inclusion Council (HEDI) is excited to launch this survey to give *you*, our workforce, an opportunity to provide ideas for improving the state of Diversity, Equity, and Inclusion (DEI) in our Department and across the state.

We welcome *all recommendations* related to DEI. These can be starter ideas, in-progress initiatives, or larger projects, just as long as they impact either our Department of Health Services (DHS) workforce or the communities that our agency serve. These recommendations may range from policy changes, new trainings, hiring practices, organizational changes, new program initiatives, and much more!

Confidentiality Clause

Note that the "Recommender Information" section (located at the end of the survey) is entirely optional and at your discretion to provide us with contact information. If we would like to gain more insight into your idea as we prepare final recommendations, we may reach out for further information (only if you have provided your name and consent for future contact).

Your information is confidential and will not be shared with anyone else other than those on the HEDI Subcommittee who are compiling these requests. If you choose not to provide any identifying information, your input is still valued and will be included in our discussion and decision making.

1. In 3 - 5 sentences, provide a brief description of a recommendation, initiative, or effort related to Diversity, Equity, Inclusion (DEI) that could be made at DHS.

2. In 3 - 5 sentences, describe how your recommendation promotes DEI for the DHS and/or the communities that DHS serves.

3. Select which group(s) your recommendation impacts. Check all that apply.

- My Division/Office/Facility
- Another Division/Office/Facility
- DHS as a whole
- A specific demographic of employees
- A specific demographic in the community
- A specific community
- Other

LOGIC Hidden unless: #3 Question "Select which group(s) your recommendation impacts. Check all that apply. " is one of the following answers ("Other")

4. If you selected "Other", please explain.

5. Select the one option that most closely aligns with the status of this recommendation.

- Loosely brainstormed idea, project or policy
- Structured idea, project or policy that has not yet been started
- Currently being pursued as a project with no funding
- Currently being pursued as a project with funding
- Project or policy successfully implemented by another DHS division, another state agency or organization
- Other — Write in

6. Provide further detail on the status of this recommendation based on your selection above, e.g., *departmental leadership support (please provide specific names), make up of the current resources dedicated to the project, etc. (Optional)*

7. Provide any remaining supporting details around this recommendation. (Optional)

Resource Needs (Optional)

Page description:

While filling out this section below, we ask that you share information to the best of your knowledge. If you do not have any information related to resource needs (staffing, technology, hours, etc.), leave this section blank and proceed. Rest assured, leaving this section blank will not impact its qualification to be summited. Your recommendation will still be reviewed and considered with equal attention. Our team would just like to collect as much information as possible at this time!

8. Do you anticipate this recommendation requiring additional resources such as staffing, technology, external contracts, etc.?

- Yes
- No

9. Do you have an estimated cost?

- Yes
- No

10. If yes, input estimated cost.

11. Please provide further detail of the cost breakdown that led to the number inputted above.

12. Alternatively, if you are aware of a similar program that has been implemented elsewhere (internally or externally) please share any resources or links where our team can find more information.

Recommender Information

Page description:

Additional Information - Tell us about yourself. (Optional)

13. Our team will be reviewing the information you have provided and work to build any further level of structure necessary for a fair evaluation. In the case that we require any additional details or information, are you open to our team contacting you for further information? If so, please make sure you provide your contact information below.

- Yes
- No

14. Recommender Information (Optional)

First Name

Last Name

DHS Work Email

Job Title

LOGIC Show/hide trigger exists.

15. Please select your division or office or facility where you work.

- Division of Care and Treatment
- Division of Enterprise Services
- Division of Medicaid Services
- Division of Public Health
- Division of Quality Assurance
- Office of Health Equity
- Office of the Inspector General
- Office of Legal Counsel
- Office of Policy Initiatives and Budget
- Office of the Secretary
- Central Wisconsin Center
- Mendota Mental Health Institute
- Northern Wisconsin Center
- Sand Ridge Secure Treatment Center
- Southern Wisconsin Center
- Winnebago Mental Health Institute
- Wisconsin Resource Center
- Other

LOGIC Hidden unless: #15 Question "Please select your division or office or facility where you work. " is one of the following answers ("Other")

16. If you selected "Other" please explain.

Thank You!

Thank you for taking the time to share your ideas and recommendations! We appreciate everything that you are doing to support each other and our communities and are excited to be at the forefront of change and innovation in Wisconsin.

To learn more about HEDI, we encourage you to visit the HEDI WorkWeb at <https://dhsworkweb.wisconsin.gov/ohe/hedi.htm>.

If you have any questions, reach out to the HEDI inbox at DHSHEDIQuestionsAndComments@dhs.wisconsin.gov.
