Bringing Innovation Over the Golden Gate Bridge: The Feasibility of Re-creating San Francisco County’s Innovation Office in Marin County

Alice Kinner

Executive Summary

Often in government, things are done simply because that is how they have been done historically. The San Francisco Human Services Agency (SF HSA) has created an Innovation Office to improve its systems and service delivery. It draws on several evidence-based methodologies and disciplines to address the most pressing concerns of San Francisco’s residents. Marin County Health and Human Services (HHS) is at a precipice. Marin County HHS has completed a long strategic planning process and has an opportunity to implement system and service improvements. Marin County HHS can adopt many of the techniques of the SF HSA Innovation Office, but they must be closely aligned with the existing structure and current strategic plan. Simply stated, government can do better. Government can and must innovate. Without doing things differently, it will be impossible to achieve health and wellness equity.
Risk and Innovation

Innovation is necessary to improve services and systems. Risk is often seen as the consequence of change and innovation; however, deliberately neglecting to innovate is a bigger risk. Thoughtful management of change is critical to effectively implementing an innovation. Change management ensures that the change that is desired not only occurs, but is thoughtfully and sustainably maintained.

Precedence is overvalued in government. Often in government, things are done simply because they have been done that way historically. If something has been proven to work decently, it is not re-examined. Failure is feared by government for good reason. Those who have tried and failed before have been held accountable in the court of public opinion, creating a culture that is extremely risk-averse. But taking risk and failing are not the same. While failure is possible with risk, it is also possible to fail without taking any risk. One example can be found by taking a look at the resistance the U.S. Postal Service (USPS) has had to adapting to changing times and trends in shipping. USPS’ hesitation to become more customer service focused and its slowness to adopt modern technologies has resulted in its failure to compete with modern companies like FedEx and UPS. Not doing anything to improve itself can become a failure over time.

Another barrier to innovation in government is the perception that existing processes were developed to ensure fairness. In truth, those same processes can inhibit innovation and can contribute to inequities. For example, if an agency is underinvesting in mobile technology because “not everyone has a smartphone,” it is failing to serve those clients who do use smartphones well at the expense of “fairness.” In fact, reliance on smartphones for online access is especially common among younger adults, nonwhites, and lower-income Americans. These are the very clients that social services departments intend to serve that are being missed.

One of the main principles of change management is to be able to demonstrate urgency and articulate a convincing need for change. For any recommendation about innovation to be successful, the first step must be in determining and articulating “why now?” Marin County HHS is at a pivotal moment. In 2016 it began a developing a strategic plan. After nearly two years of data mining and focus groups with staff, clients, and community stakeholders, Marin County HHS is ready to start moving toward the vision that all in Marin County will flourish. New teams are being formed, baseline data are being collected, and there is an appetite for change among the executive team. Now is the time to work differently, to innovate.

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An Innovation Office

In 2013, an anthropologist and Code for America fellow, Dr. Marc Hébert, PhD, started a project at San Francisco Human Services Agency (SF HSA) focused on CalFresh enrollment. A year later, recognizing the value of innovation, the SF HSA executive leadership team hired Marc to create an Innovation Office. Marc focused on addressing clients’ “pain points” by working with staff most proximal to the work to develop new ways of delivering service. Marc’s office does not look like a typical government cubicle; there are flow charts on the walls, dim lights and tables pushed together for easy conversation and collaboration. The Innovation Office’s priorities are displayed prominently so that they serve as the north star for all decisions made in that room.

Innovation in local government is happening, as evidenced by SF HSA’s Innovation office as well as multiple papers published on the subject. However, innovation in local government does not always share a definition or approach. Through investigating the SF HSA’s Innovation Office, it is useful to use its definition of innovation which is the iterative process of “empathy, experiment, evaluate.” In practice, the aim of the Innovation Office is to design better systems and services.

When asked why Marc uses “empathy” where other models use “understand,” his response was:

“Largely shaped by the IDEO and [Stanford University’s] d. School who’ve used it for years because it goes beyond ‘understanding’ to feeling the friction points of the public as well as employees (especially on the front lines). When [we] don’t learn the frustration with a process or the stress of making a mistake that brings in quality assurance or the weight of a decision that could create harm and danger for people’s health without feeling it. It’s in this space that a sense of inequity resides and harnessing that sense to create change or a call to action that drives us.”

Empathy is not just a part of innovation but a critical value of the SF HSA’s Innovation Office.

Marc’s approach draws on several methodologies and disciplines to address the most pressing concerns of San Francisco’s residents. Some of the key disciplines that Marc draws from include Human-Centered Design, Lean Process, Behavioral Insights and Visual Facilitation.

Service Design and Human-Centered Design

Service design is a design principle introduced in the 1990’s in Europe. It puts the client, user, customer, or human first in considering design. Marc employs this principle to bring forth innovative ideas that consider a SF HSA’s client’s experience first. It differs from previous design processes in that it takes into account what the user or client needs, wants, or experiences rather than designing solely based on the designer’s expertise, or “genius.” This practice of examining processes and services by empathizing with the user’s experience is the only way to improve said experience. Human-Centered Design is important because it puts our clients’ needs at the center of services.

Lean Process Improvement and the Peak Academy

Lean was developed at Toyota in Japan to improve its efficiencies so it could compete with foreign car manufacturers. It is a philosophical way of working which emphasizes the removal of waste within a process. Since then, many corporations have adopted Lean to create more value for their customers with fewer resources. Lean has maintained its dominant status in the private sector but has begun to gain momentum in the public sector. The City of Denver established its own Lean training program called, Peak Academy. Denver’s Peak Academy’s vision is “changing the way government operates to improve your experience.” Peak Academy trains city employees at all levels on the principles of Lean, with the goal of eliminating waste, improving efficiency, and creating a higher standard of government. According
to their website, trainees learn techniques and strategies for implementing Peak Performance throughout their department, taking personal investment in the city’s continuous improvement initiatives. Peak Academy is also available to other jurisdictions—Marc has attended and sent his staff as well.

**Behavioral Insights**

Behavioral insights combine insights from psychology, cognitive science, and social science with empirically-tested results to discover how humans actually make choices. 

**Visual Facilitation**

Visual facilitation is the use of imagery to help lead a group toward a goal. Most people are visual learners, and this technique allows participants to engage more easily. In the way that Marc uses it, it blends design, Lean Process Improvement, and behavioral insights.

**Key Finding**

While there are hundreds of approaches to innovation in a local government setting, SF HSA’s Innovation Office is simple and elegant. It is personal, valuing the lived experience of staff and clients, and evidence-based, drawing from best practices of service and system design. Simplicity means something is easy to understand but not necessarily “easy” to accomplish. Nothing elegant is easy. Developing a model of innovation for Marin County HHS will take a big investment.

**Intentionally Innovate**

Designating a “coordinator” or “point person” has been a recommendation by others who have hoped to re-create an Innovation Office in their own jurisdictions. While a point person to lead service and system design is essential, it is only the bare minimum. That person needs to work closely with the executive team, and must have ongoing “buy-in.” That does not mean signing-off on having the person and the office in place and then being done. It means having an active and ongoing role in the activities of the office. The executive team must have an interest in the outcomes, provide an investment of continuing resources, and be champions for allowing staff at all levels to participate in innovation.

The reason adding an “innovation coordinator” may not have worked in jurisdictions who have recommended it is that it was not part of the departments’ existing system and vision. In contrast, recommendation of this case study considers Marin County HHS’ strategic vision, direction, and actions. It involves overlaying a modified version of Marc’s model of innovation on teams that are already currently being developed. The first team is the Community Engagement and Communication (CEC) team. Two tasks of the CEC team are to engage communities to co-create solutions, and to give Marin County HHS greater reach into the community, allowing them to put clients at the center of program, system and service design. The second team in development is the Measurement, Learning and Evaluation (MLE) team. This team’s charge is to interrogate data to ensure the quality of Marin County HHS’ work, and to catch growing inequities in conditions, communities, and client populations. Using Marc’s model of innovation, CEC would serve as “empathy,” responsible for listening to and understanding community needs. MLE would serve as the primary lead for “evaluate,” ensuring the iterations are measured for effectiveness. What is missing is a person to pull it all together and “experiment.”

The primary recommendation is to have a point person serve as service and system delivery designer and facilitator. This person should bring both the CEC and MLE together to create “group experiences” that are problem-based, and develop experiments. Problem-based means that any training about using service design tools is directly tied to a problem that employees and the public want to address. Coordinating between staff who are hearing the

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community first-hand (the CEC team), with those who have access to the most data about how well Marin County HHS is performing as a department (MLE) will create rich opportunities for innovation. The point person will ensure the conversation remains productive, that additional stakeholders (including staff proximal to the work) are included, and that there is a clear work plan at the end of the meeting. This person will also be responsible for benchmarking progress over time.

To build capacity, Marin County HHS should invite Peak Academy to train MLE and CEC staff. The point person should have additional training in visual facilitation and behavioral insights. The goal is to incorporate service design into what Marin County HHS is already working toward, so that it does not become an idea on paper only or a program that creates “one off” projects. Rather, it will become part of the system in which the effectiveness of the county’s work is measured and the community is engaged. Service delivery alone cannot accomplish the strategic goal of achieving health and wellness equity in Marin County, but it can serve to bridge two critical teams to address specific pain points that the department’s clients are experiencing.

Simply, government can do better. Government can and must innovate. Without doing things differently, it will be impossible to achieve health and wellness equity. The SF HSA Innovation Office is a great example of moving the needle toward a more efficient government that leaves its clients and its citizens better off.

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