

# Operationalizing Goals to Maximize Public Health Planning



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## Introduction

Public health plans often include bold goals but can stop short of outlining how those goals will be achieved. Without defined actions, timelines, and responsibilities, plans risk becoming “shelfware.” Teams may feel inspired by a strategy but unclear on how to move it forward, leading to delays, duplication, or loss of momentum.

This resource offers four simple, adaptable tools to help translate high-level goals into concrete steps. It encourages teams to start with implementation in mind, define roles and responsibilities early, and use short cycles and feedback loops to keep the work active and aligned. You can use either tool on its own or together with the other tools. As your team explores them, consider how other implementation practices like collaboration structures and accountability systems can support success.



## Strategic Priority Planning Worksheet

This tool is best for clarifying big-picture strategic priorities before diving into detailed planning. It helps (1) connect high-level vision to organizational goals, objectives, and activities, (2) identify key players, and (3) outline major building blocks for implementation.

### How to Use This Tool

1. Name the strategic priority and describe the intended long-term impact or outcome.
2. Write one or more SMART objectives that define what success looks like.
3. Identify how this strategic priority connects to broader organizational vision and goals.
4. List the major activities, partners, and resources needed to move the strategic priority forward.
5. Note potential barriers and the supports or competencies needed to succeed.

*\*Once you have outlined your high-level strategy, use ASTHO's ["Defining Clear Roles and Responsibilities for Effective Public Health Plans"](#) to clarify who is responsible for each piece and how follow-through will be supported.*

## Strategic Priority Planning Worksheet Template with Examples

### Strategic Priority Name

**What is the name of this strategic priority or initiative?**

Leadership Development and Succession Planning

### Executive Champion

**Who at the leadership level is sponsoring this work?**

Deputy Director for Administration and Workforce

### Strategy Summary

#### High-level Vision

**What's the big-picture outcome this strategic priority is aiming to achieve?**

Build a strong, diverse pipeline of skilled and confident leaders who can effectively guide teams, manage change, and advance health equity. The department envisions a culture where leadership is distributed, inclusive, and grounded in the values of collaboration, respect, and continuous learning.

## SMART Objective(s)

### What are the specific, measurable, achievable, relevant, and timebound objectives tied to this strategy?

By June 2027, the department will establish a leadership development cohort program that prioritizes emerging leaders from underrepresented or rural regions, ensuring that at least 40% of cohort participants represent diverse racial, cultural, or geographic backgrounds.

By December 2027, the department will implement an agency-wide coaching and mentorship framework that pairs at least 50 mid-level and senior leaders with early-career or newly promoted staff, ensuring representation across divisions and demographics.

## Intended Audience/Impact

### Who will benefit or be affected by this strategic priority?

- Current and emerging public health leaders across programs and regions.
- Supervisors and managers seeking to strengthen leadership, coaching, and facilitation skills.
- Staff from underrepresented, rural, and geographically isolated areas who may have limited access to formal leadership development opportunities.

## Community Impact Statement (If Applicable)

**What difference will this strategic priority make for the community?** Describe the intended change in plain language, highlighting how this work will improve health, equity, or well-being for the people most affected.

*Tip: This section should be clear and accessible enough that community members can see themselves in the impact described. Avoid technical jargon and keep the focus on outcomes that matter to people's lives.*

When public health professionals are supported to grow as inclusive leaders and mentors, communities benefit from more responsive, empathetic, and effective public health programs. This initiative ensures that leadership reflects the lived experiences and diversity of the communities served and strengthens trust, collaboration, and shared accountability for better health outcomes.

## Key Activities

### What are the major activities needed to bring the strategic priority to life? (3-5 bullets max)

- Develop a competency-based leadership curriculum aligned with the Core Competencies for Public Health Professionals and trauma-informed supervision practices.
- Partner with community-based organizations, academic institutions, and internal equity teams to co-design inclusive leadership and coaching modules.
- Launch the first leadership cohort pilot with cross-divisional and geographic representation.
- Design and implement a structured mentorship and coaching framework, including mentor training, match criteria, and reflection templates.
- Conduct pre- and post-assessments to evaluate leadership confidence, mentorship outcomes, and organizational impact.

## Timeline

**Broad phases or milestone dates. Tie into implementation planning later.**

- Phase 1 (Jan – June 2026): Program design, partner engagement, and pilot planning.
- Phase 2 (Jul – Dec 2026): Launch leadership cohort and mentorship framework pilots.
- Phase 3 (Jan – Dec 2027): Evaluate outcomes and refine for full rollout.

## Organizational Alignment and Supports

### Alignment and Organizational Goals

**How does this strategic priority support broader organizational vision and goals?**

- Advances Goal 2: Strengthen a skilled, engaged, and resilient workforce.
- Supports PHAB Domain 8.

### Resources Needed

**What people, tools, money, or systems are required?**

- Staff time for program coordination, facilitation, mentoring activities.
- Funding for training design, coaching tools, and evaluation support.
- Technology platform for virtual learning and tracking mentorship connections.

### Risks and Barriers

**What challenges might arise and how could they be addressed?**

- Limited time for staff participation due to operational demands.
- Risk for inequitable access or inconsistent supervisor support.
- Maintaining engagement and tracking progress over time.

### Supports Needed (Infrastructure, Skills, Processes)

**What capacities or policies need to be in place to enable success?**

- Agency policy allowing dedicated time for professional development.
- Clear criteria and guidance for mentor/mentee pairing.
- Leadership endorsement and communication to elevate program visibility.
- Integration with existing performance review and workforce development systems.



## Implementation Plan Template

This tool is a straightforward resource to help break down specific priorities, goals, or objectives into actionable steps. It's ideal when you're ready to move from planning to doing.

### How to Use This Tool

1. Start with each strategy, goal, or objective from your existing plan (and be sure to include it in the title of your Implementation Plan Table for all involved).
2. Define the discrete actions or activities needed to implement it.
3. Assign clear ownership and roles/responsibilities.
4. Establish a timeline to create urgency and accountability.
5. Identify the resources (money, tools, people) needed.
6. Define how progress will be measured or tracked.
7. Build in time to revisit and adjust the plan (an example plan is illustrated in Table 1). Implementation is a cycle, not a linear process. Revisiting your plan consistently helps maintain momentum and keeps champions and collaborators engaged over time.

**Table 1. Example Implementation Plan: Improve Community Access to Behavioral Health Services**

<b>Actions</b>	<b>Responsible Party</b>	<b>By When</b>	<b>Resources Needed</b>	<b>How We'll Know It's Working</b>	<b>Status Updates</b>
<b>Host two stakeholder focus groups.</b>	Jane on the Behavioral Health Team	June 30	Meeting space, facilitator guide, stipends for participants.	At least 10 participants attend each group and provide feedback.	Focus groups scheduled for June.
<b>Analyze focus group data and identify key barriers.</b>	Marcus from Evaluation Team	July 15	Transcripts, staff time, qualitative analysis software.	Summary of three to five recurring themes or barriers compiled.	Analysis software purchased; Marcus trained in analysis for when focus groups are held.
<b>Present findings and proposed actions to leadership.</b>	Jane and Marcus	July 31	Slide deck, executive summary.	Leadership endorses at least two proposed action steps .	Meeting scheduled with leadership to review findings July 20.

## Example Implementation Plan

### Strategy, Goal, Objective

Improve community access to behavioral health services.

#### Action 1: Host two stakeholder focus groups.

- Responsible Party: Jane on the Behavioral Health Team.
- By When: June 30.
- Resources Needed: Meeting space, facilitator guide, stipends for participants.
- How We'll Know It's Working: At least 10 participants attend each group and provide feedback.
- Status Updates: Focus groups scheduled for June.

#### Action 2: Analyze focus group data and identify key barriers.

- Responsible Party: Marcus from Evaluation Team.
- By When: July 15.
- Resources Needed: Transcripts, staff time, qualitative analysis software.
- How We'll Know It's Working: Summary of three to five recurring themes or barriers compiled.
- Status Updates: Analysis software purchased; Marcus trained in analysis for when focus groups are held.

#### Action 3: Present findings and proposed actions to leadership.

- Responsible Party: Jane and Marcus
- By When: July 31.
- Resources Needed: Slide deck, executive summary.
- How We'll Know It's Working: Leadership endorses at least two proposed action steps.
- Status Updates: Meeting scheduled with leadership to review findings July 20.



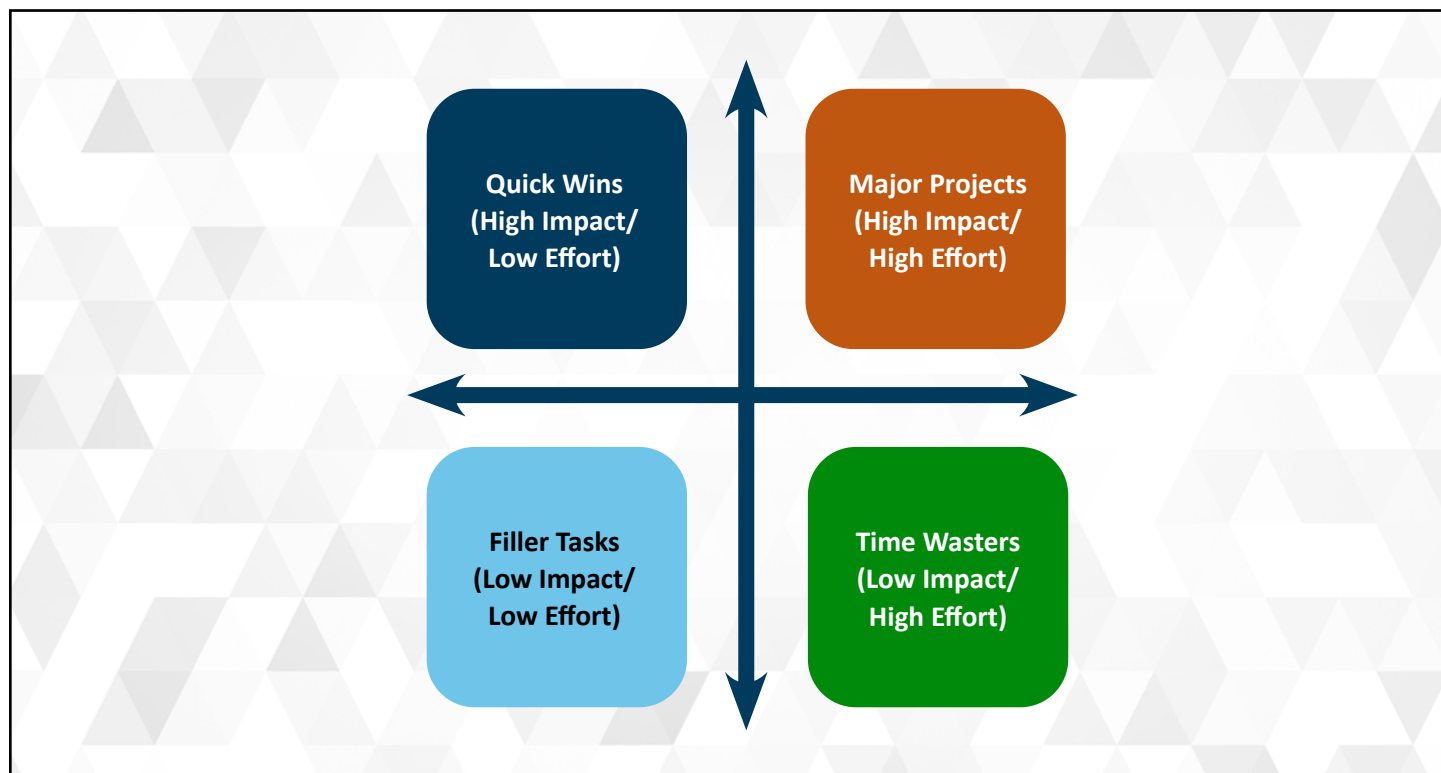
## Impact and Effort Matrix

This tool helps teams prioritize activities based on impact and effort. It is especially helpful when you have a long list of potential activities and need to prioritize where to start. It helps teams quickly assess which actions offer the greatest return on effort, making it easier to focus on what's most feasible and impactful. This tool is great for early implementation planning when momentum is stalled and you need to refocus.

### How to Use This Tool

1. To make sure all voices on the team are heard, start with an individual brainstorm of activities that could help implement your goal or objective on notepads or sticky notes.
2. Have each individual share their best ideas with the group.
3. For each action, ask: How much effort will this take? How much impact could it have?
4. Draw an action mapping grid (illustrated in Figure 1) and place the activity in the appropriate quadrant based on your team's consensus.
5. Focus first on:
  - o Quick wins (High Impact/Low Effort) to build momentum.
  - o Major projects (High Impact/High Effort) for long-term value.
6. As capacity, timelines, and context change, adjust the grid to stay aligned and responsive.

Figure 1. Action Mapping Grid



## Force Field Analysis

A Force Field Analysis is a simple but powerful tool to help teams understand the forces that support or block implementation. It visualizes the “push and pull” factors around a particular strategy or activity, making it easier to identify where to focus energy for change. It helps expand beyond “what” you plan to do, moving toward “how” you’ll actually get it done by helping you get a clear picture of the real-world conditions around your plan.

### How to Use This Tool

1. Identify your goal or strategy and write it clearly at the top of your analysis.
2. List factors or driving forces that support or encourage progress (e.g., leadership commitment, existing partnerships, available funding).
3. List factors or restraining forces that may block or slow progress (e.g., limited staff time, unclear roles, competing priorities).
4. Give each one a score (1 = weak, 5 = strong) to show how much influence it has.
5. Visualize it by drawing a vertical line with your goal written at the top. On the left side, list driving forces with arrows pointing toward the goal line. On the right side, list restraining forces with arrows pointing toward the goal line. The length or thickness of each arrow can represent its strength – alter this accordingly. Reference Figure 2 for an example.
6. Discuss what the balance reveals to focus your next steps:
  - o Which driving forces can you strengthen or leverage further?
  - o Which restraining forces most limit progress?
  - o Are there any forces that can be accepted or managed rather than changed?

### Force Field Analysis Example

#### Goal or Strategy

Expand community health worker program.

#### Driving Forces and Corresponding Strength (1-5)

- Strong leadership support (5)
- Grant funding available (3)
- Community demand (4)

#### Restraining Forces and Corresponding Strength (1-5)

- Strong leadership support (5)
- Grant funding available (3)
- Community demand (4)



## Strategic Reflection

### Which driving forces can you strengthen or leverage further?

- **Strong leadership support:** Maintain and amplify visible leadership endorsement. Include community health worker program updates in leadership meetings and highlight early outcomes to sustain commitment.
- **Community demand:** Leverage community voices and testimonials in communications and grant reports to reinforce the importance of expansion.
- **Grant funding:** Use current funding success to attract additional partners or match funding for sustainability

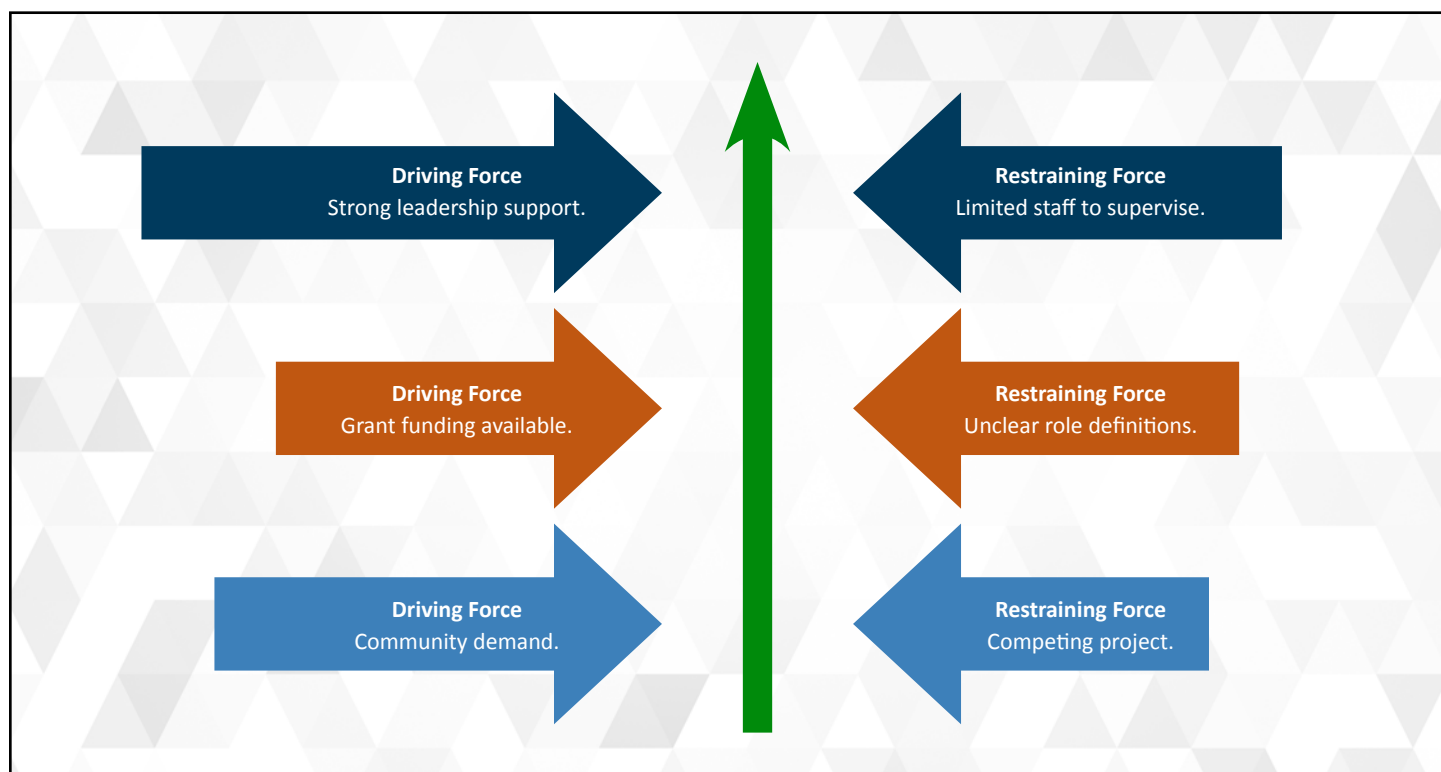
### Which restraining forces most limit progress?

- **Limited staff to supervise:** This is the most immediate barrier. Without adequate supervision, new community health workers can't be effectively onboarded or supported. A short-term solution is to identify interim supervisors or provide cross-training opportunities.
- **Unclear role definitions:** Address early to prevent confusion or duplication with other staff roles. Develop clear job descriptions and scope of work before recruitment.

### Are there any forces that can be accepted or managed rather than changed?

- **Competing project:** Recognize that competing initiatives will continue to exist. Coordinate timelines and messaging so projects complement rather than compete for resources. Use shared staff or communication channels where possible.

Figure 2. Force Field Tool Example



## Putting It Into Practice

Now, explore real-world strategies and facilitation ideas to apply the tools in context, build momentum, and keep implementation moving forward.

### Use a 90-Day Sprint Model

Rather than defining all actions at once, use a short cycle planning approach. This approach makes implementation feel more achievable and iterative, not overwhelming:

- o Each quarter, identify the highest-leverage actions that can move the plan forward.
- o Focus on feasibility and momentum. What can realistically be done in 90 days?
- o Revisit and revise actions regularly so the work evolves with capacity and context.

### Break Down High-Level Priorities Using “Action Ladders”

Sometimes a priority feels too broad to act on (e.g., “Improve access to mental health care”). To make progress, consider a ladder approach or breaking your goal down into more specific actions at different “rungs” of the system:

- o Systems level: What policies, funding changes, or infrastructure improvements could support this priority?
- o Program level: Are there new or existing services that could be expanded, improved, or better coordinated?
- o Community level: What outreach, education, or partnership efforts could support this priority?
- o Organization level: Are there internal workflows, staffing decisions, or operational tools that need to be updated?

This “ladder” approach helps teams generate concrete actions that align with their roles and spheres of influence. You don’t have to tackle everything at once, pick the “rung” where you have the most control or momentum, and start there.

### Co-Create Actions with Implementers

Often, plan writers are different from implementers. Invite program leads, community partners, and staff closest to the work to help define what “doing” looks like. Consider hosting short work sessions focused on one goal or objective, using prompting questions:

- o What are we already doing that aligns with this?
- o What small step could we take in the next 30-60 days?
- o What would success look like for this by the end of the year?

## Leverage Pre-Built Action Libraries or Examples

Sometimes it's hard to get started because teams aren't sure what types of actions are appropriate or feasible. Pre-built action libraries, or examples from other jurisdictions' implementation plans, can provide a starting point for brainstorming and adapting proven approaches to your context, such as:

- o [What Works for Health](#) by County Health Rankings & Roadmaps
- o [Tools for Action](#) by HHS
- o [Evidence-Based Public Health](#) by ASTHO
- o Other [CDC-recommended strategies](#)

Reviewing these examples can help jumpstart ideas and reduce the time it takes to move from planning to doing. You can also create a shared internal "action bank" of common action types tied to typical public health priorities. This can include things like:

- o Conducting a community forum or partner listening session.
- o Developing a policy brief.
- o Launching a pilot project in one region.
- o Training 10 staff or partner organizations.
- o Developing an internal workflow or SOP.
- o Sharing disaggregated data with X audience.

This kind of action bank can be developed internally or crowdsourced across teams, building a practical menu of activities that align with evidence-based and field-tested strategies.

## Assign a Plan Champion Per Priority Area

Empower one person or team to own each priority area. They won't do all the work, but will shepherd the implementation thinking. They will convene conversations, monitor and report on progress, facilitate adaptations, and ensure celebration and acknowledgment of milestones.

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