

## **Formulate Goals and Strategies At-A-Glance**

During the Formulate Goals and Strategies phase of the MAPP Process, participants take the strategic issues identified in the previous phase and formulate goal statements related to those issues. They, then, identify broad strategies for addressing issues and achieving goals related to the community's vision. The result is the development and adoption of an interrelated set of strategy statements.

### **Recommended Participants and Roles:**

?? MAPP Committee — identifies and develops goals and strategies; adopts final strategy statements.

?? Core Support Team or Subcommittees — explores specific issues or strategies on an “as needed” basis.

### **A Step-by-Step Overview of the Formulate Goals and Strategies Phase:**

1. Develop goals related to the vision and the identified strategic issues.
2. Generate a range of strategy alternatives to address the goals and help the community achieve its vision. Take current strategies and activities into consideration, as well as developing new and innovative approaches.
3. Consider barriers to implementation, such as insufficient resources, lack of community support, legal or policy impediments, or technological difficulties.
4. Explore implementation details by considering concrete actions that need to occur, which organizations and individuals need to be involved, what resources are required, and what the timeline should be.
5. Select strategies by choosing among the alternatives. Once selected, adopt the strategies through formal or informal processes.
6. Draft and adopt the planning report. Written documentation ensures consensus, provides a source of reference, and helps to set the stage for action planning and implementation.

## Formulate Goals and Strategies

During this phase, both goals and strategies are developed for each of the strategic issues identified in the previous phase. These are defined as follows:

~~///~~ **Goals** — broad, long-term aims that define the desired result associated with identified strategic issues.

~~///~~ **Strategies** — patterns of action, decisions, and policies that guide a local public health system toward a vision or goal. Strategies are broad statements that set a direction.

Goals and strategies provide a connection between the current reality (what the public health system and the community's health looks like now) and the vision (what the public health system and community's health will look like in the future). This is illustrated by the graphic - [How Do the MAPP Components Relate?](#)

Strategies can vary by level, time frame, or focus. Examples include:

~~///~~ Overall strategies for the local public health system

~~///~~ Specific strategies for members of the local public health system

~~///~~ How specific issues or community health problems will be addressed by programs or services

~~///~~ What resources will be used and how they will be managed (e.g. using information technology).

The collection of goals and strategies should provide a comprehensive picture of how local public health system partners will achieve a healthy community. Goals set a common direction and understanding of the anticipated end result. Strategies communicate how the community will move in that direction. In providing a focus for future action, strategies lead to coordinated action by addressing the complexity of seemingly complicated problems. The emphasis on action also serves a critical role in linking planning to implementation. Each member of the local public health system and the community at large can see in the strategies what must be done and how partners can work together to achieve the common vision.

### Vision ? Strategic Issues ? Goals ? Strategies

Strategy development involves two separate, but interrelated, activities: formulating strategies and adopting strategies. Strategy formulation is a process of analysis and creativity, while adoption is a decision-making process. Separating the two helps ensure that strategy formulation is comprehensive and thorough and will not be influenced by a premature acceptance of a strategy. Energies are best spent up front in the strategy formulation stage rather than debating the merits of a limited number of quickly generated alternatives. Time spent in strategy formulation will reduce the time needed for debating alternatives. The merits of each speak for themselves. Creativity and learning within the local public health system are important elements that must be fostered.

## How to Formulate Goals and Strategies

The search for workable strategies should be flexible, yet systematic and deliberate. To foster creativity, this phase begins with a broad focus, then gradually adds the details provided by analysis. By following the steps below, a community can produce a set of linked strategies that enable it to achieve its vision. The St. Louis County, MO, Peoria City-County, IL, and Chicago, IL vignettes show how communities have conducted this activity.

Convene the participants for the following steps either through a series of MAPP Committee meetings (with small group work in between) or through a one-day search conference. The search conference format will only work if all necessary participants are available to participate.

***Step 1 — Develop goals related to the vision and strategic issues***

Strategy development begins with an understanding of the desired result. These results are best expressed as goal statements that come from two sources: the vision and the strategic issues. Having clear goals provides a focus for strategy development.

The vision will often have several components; it is useful to understand each of these as each may require a different goal and strategy. During this review, a clearer picture of the vision may emerge and it may be refined or expanded to incorporate findings from earlier stages of the planning process.

Next, review the strategic issues that were developed in the prior phase and identify goals that will be achieved when those issues are resolved. Goal statements should reflect a relationship between strategic issues and vision elements. The vision presents, in the broadest sense, what the public health system wants to achieve. Strategic issues must be resolved for this to be realized. Goal statements capture these results in more concrete terms. The following illustrates a possible goal for the example used in the Identify Strategic Issues phase:

**Strategic issue:** How can the public health community ensure access to population-based and personal health care services?

**Goal:** All persons living in our community will have access to affordable quality health care.

**Vision:** Accessible Services (Note: this may represent the one element of the vision statement that is most connected to the strategic issue.)

Two possible methods for undertaking Step 1, developing goals, are described below. The first option is recommended, as it generally leads to a more efficient use of the MAPP Committee's time.

*✍️ Prior work by a small group* — many communities find that a small group is most effective and efficient at developing the first draft of goal statements. The small group (either a subcommittee or the Core Support Team) should organize the strategic issues into goals or issue arenas of logical groupings. The goals or issue areas are then presented to the entire MAPP Committee (and any other participants recruited for the effort) for general discussion.

*✍️ A MAPP Committee discussion* — some communities choose to develop goals as part of a

committee discussion. If this method is used, good facilitation and preparation will be important for moving the discussion along. Ideally, this should require no more than one committee meeting. The strategic issues and the vision should be used as a major information source throughout the discussion to ensure that goal development stays on track.

Once the goals are discussed and refined, participants may break into smaller groups, based on interest areas, to conduct the remaining steps (further guidance is included in the steps below).

### ***Step 2 — Generate strategy alternatives***

During this step, participants consider and identify potential strategies for achieving each goal and attaining the community vision. Strategies emerge from several sources, such as past patterns of action and new realizations that changes are needed. If past strategies have been effective, capturing them and extending them into the future can be a workable approach. Organizations or communities often have existing strategies that have evolved over time. Just discovering and articulating these hidden strategies can be an effective way to develop alternative strategies. Consider what must be changed or added to make current activities or strategies work in the future.

The task in this step is not to pick the best course of action, but to generate several strategies that reflect the range of choices the community may select from to reach its vision. For example, if a goal calls for having all children appropriately immunized by age six, strategy alternatives might include a coordinated immunization effort by all community health care providers or an approach where the local public health agency and schools take primary responsibility.

It is important to resist pressures to settle for an obvious or comfortable strategy, especially if there appears to be a strong consensus that further search is not really needed. Only when alternatives are generated will new and innovative approaches be considered.

A second perspective can be gained in looking back at strategic issues and vision elements behind the goals. Careful analysis of the four assessments used in identifying a strategic issue can be very helpful in searching for new strategies. An example follows:

**Strategic issue:** How can the public health community ensure access to population-based and personal health care services?

**Strategy Alternative:** Establish a community ombudsman program for city and private services.

**Strategy Alternative:** Strengthen coordination among local public health system partners to eliminate gaps in service and improve referral mechanisms among providers (i.e., between mental health and primary care).

**Strategy Alternative:** Increase awareness of available services through the development of an online directory of area public health and health care organizations.

**Strategy Alternative:** Develop the capacity to provide culturally and linguistically appropriate services.

**Strategy Alternative:** Increase education and outreach efforts so that all residents are aware of the population-based and personal health care services available in the community.

**Goal:** All persons living in our community will have access to high-quality, affordable health care.

**Vision:** Accessible Services (Note: this may represent the element of the vision statement that is most connected to the strategic issue.)

At this point, strategy development should have a brainstorming feel to it as MAPP Committee members search for a range of possibilities for addressing issues and reaching the vision. Strategy alternatives should build upon strengths and opportunities while also countering the threats reflected in the strategic issues. Therefore, in addition to discussing the weaknesses and threats to be addressed, remember to revisit the opportunities, assets, and strengths uncovered in the four MAPP Assessments. These strengths represent important resources and can ensure that implementation of the strategies is feasible. Record this information in Question 1 in the Strategy Development Worksheet. Each goal may have several strategy alternatives, and strategies may cut across goals. Resolving overlap or redundancy is not important at this point.

This step is best conducted through small group work. After the entire MAPP Committee discusses and refines the goals (Step 1), participants should break into small groups based on interest areas. Depending upon the number of strategic issues and goals identified by the community, the groups can be assigned one to three issue areas. The small groups brainstorm and develop strategy alternatives, as well as identify barriers (Step 3). After the small groups conduct Steps 2 and 3, the results are returned to the full MAPP Committee for discussion and revision.

### ***Step 3 — Consider barriers to implementation***

To begin to add realism to the alternatives, barriers to implementation should be considered. Barriers may include insufficient resources, lack of community support, legal or policy impediments to authority, technological difficulties, and limited organizational or management capacity, among other issues. For example, an immunization strategy may call for a countywide immunization database that can be accessed by all providers. The benefits of this database may be compelling, but the cost and technological challenges of its development and operation may be significant.

Barriers will not necessarily eliminate a strategy alternative. However, they should alert the community to obstacles that must be addressed if that alternative is pursued. Nearly all innovative alternatives will face barriers; if they have never been attempted before feasibility is likely to be uncertain. Be wary of alternatives that appear to have few barriers, as this may reflect either a need for more critical thinking or a strategy that is a “dressed up” version of the status quo. Understanding barriers can allow for a more informed decision later on.

All barriers may not be apparent at this point, but will continue to emerge in the following steps.

Likewise, implementation details may come to light as barriers are uncovered. Barriers can be summarized in question 3 on the [Strategy Development Worksheet](#).

As described in Step 2, the identification of barriers is best done through small group work. The small groups — assigned with one to three issue areas — should brainstorm and develop strategy alternatives and barriers to implementation. After the small groups are finished, they present their results to the MAPP Committee and the information is discussed and refined.

#### ***Step 4 — Consider implementation details***

Next, flesh out some of the details related to implementing each strategy alternative. Consider questions such as:

- ~~✍~~ What specific actions need to take place?
- ~~✍~~ What is a reasonable timeline?
- ~~✍~~ Which organizations and individuals should be involved?
- ~~✍~~ What resources are required and where will they come from?

Here, the committee is not actually conducting implementation planning, but rather thinking broadly about how each alternative could be implemented. Implementation planning occurs in the Action Cycle, but thinking about it here will make that job easier. Exploring details about implementation is useful because:

- ~~✍~~ providing a direct connection to implementation **makes the strategy action-oriented** and reinforces that the ultimate purpose of planning is to facilitate action,
- ~~✍~~ thinking about implementation at this point **lays groundwork** for the Implementation stage of the Action Cycle, and
- ~~✍~~ understanding the details of implementation **prevents the process from getting bogged down** in a debate over alternatives that are simply not feasible.

As implementation details are considered, the MAPP Committee will be in a better position to clearly specify and refine the strategies. Strategies should be specified in broad action terms, but include details that will help to guide implementation.

As with previous steps, this activity may best be conducted through small group work. After the MAPP Committee discusses and refines the strategy alternatives and barriers identified by the small groups, the small groups can then reconvene to explore implementation details and make preliminary recommendations (the following step). Prior to this step, the MAPP Committee may want to reconsider membership in the small groups, depending upon the types of strategy alternatives and goals that have been developed. Including key implementers in the relevant small groups ensures not only the appropriate application of expertise, but also that stakeholder interests are well represented.

#### ***Step 5 - Select and adopt strategies***

Selecting strategies may require choosing among alternatives, however, the choice should become clearer after the above steps have been completed. Examine alternatives together to understand their relationships to one another. The [Strategy Development Matrix](#) is useful in looking at how strategies

and goals relate to each other, as well as for resolving redundancies and identifying gaps. In making this comparison, strategies may be seen not only as alternatives, but as complementary elements of a strategy set. In some cases, two closely-related strategy alternatives may be consolidated into one more comprehensive strategy. Or, several strategies may be related in sequential ways so that some are sub-strategies related to the implementation of others.

Understanding the interrelationship between strategies will offer a comprehensive picture of the larger strategy that the community will implement to achieve the vision. It will also provide an opportunity to test for consistency among strategies and determine if any gaps exist.

To make strategy selection more systematic, less complex, and possibly less subject to debate, selection criteria should be agreed upon at the onset. One set of criteria commonly used in public health program planning is the **PEARL** test.<sup>1</sup> The **PEARL** test was designed specifically to test the reality and feasibility of a proposed strategy. While it does not assist in actually prioritizing strategies, it does help eliminate strategies that are unrealistic. The **PEARL** acronym is defined as follows:

- ✂ **Propriety** — Is a strategy consistent with the essential services and public health principles?
- ✂ **Economics** — Is the strategy financially feasible? Does it make economic sense to apply this strategy?
- ✂ **Acceptability** - Will the stakeholders and the community accept the strategy?
- ✂ **Resources** — is funding likely to be available to apply this strategy? Are organizations able to offer personnel time and expertise or space needed to implement this strategy?
- ✂ **Legality** — Do current laws allow the strategy to be implemented?

**PEARL** is usually applied as a reality check. If the answer to any of the five questions is no, that strategy should probably be eliminated.

Those remaining strategy alternatives that passed the **PEARL** test should then be prioritized based on additional criteria such as:

- ✂ **Impact** - what is the potential impact on the strategic goal?
- ✂ **Cost** - what is the cost of this strategy in terms of dollars, people and time?
- ✂ **Probability of success** - how likely is that the strategy can be successfully implemented?

A strategy that the group believes would have a significant impact on one or more goals, minimize the use of resources, and have a high probability of success would be ranked as a high priority.

When selecting strategies, be particularly alert to those that are intended to address urgent issues or can be implemented quickly. Quick implementation victories can be valuable in connecting planning to action and building confidence in the process. Being able to see accomplishments achieved through the process provides clear evidence of value to participants.

Once the strategies are selected, they must be adopted. Adopting strategies involves several

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<sup>1</sup> GE Pickett and JJ Hanlon. *Public Health Administration and Practice*, 9<sup>th</sup> Ed. St Louis: The C.V. Mosby Company, 1990. pp. 226-227.

considerations, including “*How formal should the adoption process be?*” If decision making has been informal up to this point, an informal adoption process may be best. However, a separate decision to adopt the entire plan should take place to indicate its significance and the participants’ commitment to implementation. In some cases formal adoption at a special meeting may be useful to mark the end of the planning process and the formal adoption of the plan. If adoption by the MAPP Committee is the first step in getting the plan adopted by other organizations in the community, then a formal adoption process is best.

A highly participatory planning process involving many stakeholders represents a variety of interests, some of which may be competing. These dynamics may play out in strategy selection and adoption. Strategies may need to appeal to the interests of different stakeholders who are particularly concerned that their issues get addressed. Efforts should be made to accommodate key stakeholders. Here, compromise and revisiting prior decisions may be required. If the process has been collaborative, participants will come to accept that it is not necessary or even desirable to have everyone in complete agreement on every topic and will respect differing views in the interest of a common product.

Strategies may be adopted in their entirety or in stages. Where there is strong agreement on strategies, adopting them in their entirety saves time. However, if there is disagreement over proposed strategies, it may be best to treat each strategy individually so as to surface opposition and prevent controversial strategies from impeding the adoption of those for which there is agreement.

Be aware that some strategies may never garner complete agreement among all participants. Agree on what is currently possible recognizing that some issues, even after much deliberation, may be too contentious to find common ground. Putting these aside and moving forward with what can be agreed upon will build trust and confidence of participants in the planning process and allow time to consider other alternatives that may not be apparent until later.

### ***Step 6 — Draft the planning report***

The final step is to develop a draft planning report. A written planning report is useful for several reasons:

- ✍* It serves as a reference** about what has been agreed upon and the direction that has been decided. Planning can take some time and be complex; having a document to refer to can prevent future misunderstanding.
  
- ✍* It tests the consensus** about the agreements reached. Often, even in a collaborative process, what has been decided is not entirely clear until it is written down for all to review. Just drafting a plan can be a useful activity to test the strength of consensus that has been generated.
  
- ✍* It communicates the vision, goals and strategies** to partners and the broader community. At the end of a planning process, the hard work of participants requires a tangible product that can be shared, especially with those who were not involved. In addition, the plan can be used to brief new partners or elected officials on the work.

**It should be noted that the planning report is not an implementation plan. Rather, it is a plan outlining broad strategic courses of action about which that the community has reached consensus.**

Before the plan is developed, several issues should be addressed by all participants so that there is agreement on how to move forward with this important product:

*✍* **Content and format.** Will the plan report be a simple summary of the strategies or will it document the whole process? Both are useful and serve different purposes. A summary is useful for marketing and wide distribution, while a more detailed report captures the specifics.

*✍* **Logistics for producing the plan.** How and by whom will the plan be produced? Document production can be assigned to the staff of a partner agency under the direction of a drafting subcommittee. If a planning consultant is engaged, the task of drafting the report can be assigned to him/her. Another alternative is to assign this activity to the Core Support Team. Decisions about who will undertake this activity should have been made during the Organize for Success phase.

*✍* **Incorporating input throughout the document development process.** As the document moves from a rough draft to a polished product, it is wise to gather input from participants. Drafting can be useful for testing the degree of agreement on the strategies developed. In addition, periodically sharing the draft with others may encourage strong reservations to surface that may not have been voiced up to this point. While it is not practical for report drafting to be as participatory as earlier parts of the process, participation here will ensure that what is being produced will be adopted. One approach that is discouraged is having one or just a few people produce a finished report by themselves with little partner input. If worksheets have been completed along the way, drafting will not have to begin from scratch.

Once the document is complete, the entire MAPP Committee should adopt it. Plan adoption can be seen as a formal close to the planning process and a time to celebrate the hard work of the previous phases. Participant organizations within the community may also want to consider adopting the plan, to show their organizational support. The plan should then be disseminated and shared throughout the community.

## **Formulate Goals and Strategies St. Louis County, MO Vignette**

The St. Louis County Department of Health (SLCDOH) serves a large urban and suburban geographic area surrounding the city of St. Louis. In 1997, SLCDOH embarked on the “In-Partnership” process — an initiative designed to assist them in more accurately and effectively assessing and serving the communities in the area. A collaborative community health planning process with the Jennings community and an internal core functions based training process, which included ongoing collaborative activities with distinct communities in the county, were implemented. As part of these processes, SLCDOH developed two groups of strategies expressed as goals and objectives focusing on strengthening the organizational capacity of the health department and on improving community health status.

Organizational capacity goals included:

- ✍ Strengthen organizational capacity in key areas: the budgeting process, personnel resource management, organizational learning, and external communications.
- ✍ Enhance the public health leadership role in the community through centers of excellence, projecting the DOH mission in the community, and instituting the core functions.
- ✍ Create and sustain external partnerships needed to implement the core functions.

Community health goals included:

- ✍ Ensure a community and personally oriented quality health system by the following activities: redefine community health roles, assure comprehensive public health services, increase community involvement, base analysis and priority setting on assessment, define clear roles for DOH divisions, establish closer relationships with elected officials, and increase organizational quality management.
- ✍ Prevent illness, injury, disability, and premature death through small area needs assessment and priority setting to drive program planning and service integration.
- ✍ Protect the community through improved understanding of health and health threats using improved communications with the community, promoting the Centers of Excellence, evaluating program effectiveness, and targeted health education.
- ✍ Safeguard consumers from risks associated with products, services and other health hazards.

Many of the goal areas called for implementation plans to be established. Goals and actions were similar for some areas and the integration of strategies was promoted. The divisions are continuing to develop and periodically review strategies to support and attain these benchmarks. The goal statements were presented in a brief seven-page report, *DOH Strategic Plan Goals and Objectives*.

## **Formulate Goals and Strategies Peoria City-County, IL Vignette**

The Peoria City-County Health Department (PCCHD) in Illinois serves a population of approximately 130,000. PCCHD has been active in both a community planning process (using the Illinois Project for Local Assessment of Needs -IPLAN) and an organizational strategic planning process. Using the results of the organizational strategic planning process, PCCHD developed ten *Key Strategies and Tactics* from its strategic planning process and defined them simply as “What we must do”.

- ✍ Collaborate with others in the community to implement IPLAN. (The Illinois Project for Local Assessment of Needs)
- ✍ Educate staff about IPLAN and their role in implementation.
- ✍ Integrate family planning into other services dealing with women in their childbearing years.
- ✍ Provide better education related to the prevention of infectious diseases.
- ✍ Monitor infectious disease in the community, communicate results, and collaborate with others for prevention.
- ✍ Identify indicators for effectiveness.
- ✍ Provide appropriate and necessary resources for staff to be empowered to improve program effectiveness.
- ✍ Identify potential internal and external collaborators.
- ✍ Identify an operating concept of interdepartmental teams and assess the potential of these teams to actualize the goals.
- ✍ Communicate the vision statement to the public, board, and all employees of the department and develop specific strategies to relate the vision to job performance.
- ✍ Educate everyone and require 100 percent participation in CQI programs.

These strategies along with a summary of the entire Peoria strategic planning process was presented in a 25-page plan which was adopted by the Peoria Board of Health.

## **Formulate Goals and Strategies Chicago, IL Vignette**

The strategy development process was designed to identify broad action areas that would best address the strategic issues identified by the Chicago Partnership at its October meeting. Strategies were developed during a three-hour meeting in November 1999. Working initially in two smaller groups, facilitated by project staff, partnership members engaged in a brainstorming exercise to identify preliminary strategies that would address at least one or more of the six strategic issues.

Each member was provided with six blank index cards and asked to write down what they viewed as the most important strategies — one per card. Then, using a round robin approach, members took turns reading a priority strategy aloud as staff then taped the cards to the wall. During this process, members were allowed only to raise issues of clarification. Once all of the suggested strategies had been placed on the wall, members discussed, consolidated, and then organized the strategies into logical clusters. When the two groups had each completed this exercise, the larger partnership reconvened and considered all of the strategies together. At this point, further consolidation occurred.

Throughout the strategy development process, members were asked to consider their proposed strategies against the following set of PEARL criteria:

**Propriety:** Does the strategy address the issues identified? Is it technically workable?

**Economical:** Is the strategy cost effective? Does it make financial sense?

**Acceptability:** Is the strategy acceptable to the community and other stakeholders?

**Resources:** Are the resources there to implement the strategy?

**Legality/Legitimacy:** Does one have the legal authority to implement the strategy? Is it a legitimate function of the proposed implementers and consistent with their mission?

At the meeting's conclusion, the partnership had identified a set of 20 strategies organized into the following seven Action Areas:

1. Creating the Public Health System Through Partnership Development
2. Setting Chicago's Public Health Policy Agenda
3. Building a Community Capacity and Constituency
4. Strengthening the Public Health Workforce
5. Strengthening the System Through Information
6. Advancing the Public Health Agenda Through Research
7. Getting the Word Out: Marketing Public Health Messages

The strategies in these areas would serve as the basis for the partnership's priority-setting and more specific action planning activities.