



Creating an Integrated & Sustainable Chronic Disease Program

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Overview



Purpose

- To enhance the knowledge, skills and abilities to create more efficient, effective and integrated chronic disease agencies and organizations
- To enhance the ability to change systems at the organizational, community and statewide level and to manage the change process

Learning Objectives

At the end of the session, participants will be able to:

- Conceptualize, articulate and implement a comprehensive, integrated Statewide chronic disease program
- Articulate systems change concepts, define a systems change approach (other than policy change) and use their organization as an example of a systems change process
- Effectively facilitate and manage change and transition both with staff and with partners

Agenda

Time	Content
<i>Day 1</i>	
8:30 – 9:00	Introductions and Overview
9:00 – 9:15	Integration as Systems Change: Frameworks and definitions
9:15 – 10:15	The Integrated Work Plan: Integrated goals and strategies
	<i>Break</i>
10:30 – 11:00	Examples and Case Studies
11:00 – 12:00	Organizational Alignment: The integrated system
12:00 – 1:30	<i>Lunch</i>
1:30 – 2:30	Organizational Alignment: Best practices, tools and tips
2:30 – 3:00	Summary, wrap up
<i>Day 2</i>	
8:30 – 9:30	Change Management: Implementation and leadership
9:30 – 10:00	Examples, discussion
10:00 – 10:30	Summary, wrap up

Note: Examples will be provided at training.

Section I: Integration as Systems Change

Preface

Overview

- Integration is emulsification, blending

“Emulsify means combining two liquids together which normally don't mix easily. The liquids are combined very slowly, usually drop by drop, while beating vigorously, which suspends drops of liquid throughout each other.”

You can't “sort of” emulsify. It is either a beautiful vinaigrette or béarnaise, or a disaster.



Teams on top of silos do not make béarnaise.

- Integration is a mindset: it doesn't happen at a point in time or when the plan is completed. The integration team and the integration plan are tools
- Integration is organizational change. Organizational change needs good leadership and management. A leadership team must be responsible for the success of the whole (not just individual programs)
- Integration means the whole is greater than the sum of the parts
- Integration is a means, not the end; it is one approach to bring about efficiency and efficacy
- Form follows function: must define what you are trying to achieve (health outcomes) and then you can define how to best work together to achieve those (organizational outcomes)
- Creating an integrated, more efficient and effective operation is informed by evidence based principles and practices of organization development
- Organization design (structure) is only one piece of organizational development and addresses specific issues, but does not by itself achieve integration

Definitions and Frameworks

Strategic

Deliberate, calculated decisions or design based on an understanding of external, market, and internal forces and current and expected conditions; broad, organization-wide, over-arching all programs and services.

Integrated Strategy for Success and Sustainability



With a strong identity, an engaged constituency, and adequate capacity, an organization creates a potent operation and a distinct brand. It is this potency and distinction that attracts, engages, and retains supporters and facilitates the achievement of mission-related results.

Integrated Strategy for Success and Sustainability © 2010 Nonprofit Impact

Organizational Development

- A “planned effort to improve an organization’s operations through a more effective utilization of organizational resources.” (Ivancevich and Mattson)
- A multi-disciplinary systems approach
- A tool for bringing about and managing organizational change

System

- System is the sum of all the parts which impact a particular outcome – multi-organizations, various subsectors and the interrelationships among networks and sectors (i.e. public, private, nonprofit)
- System: An organization structured at a community, regional, state, national, or global level that engages many individuals in a collection of interrelated activities. Change: A permanent and holistic modification of a policy or operational approach at one or more of these organizational levels that sustains the project’s efforts
(www.americanlegacy.org/PDF/community_voices.pdf)

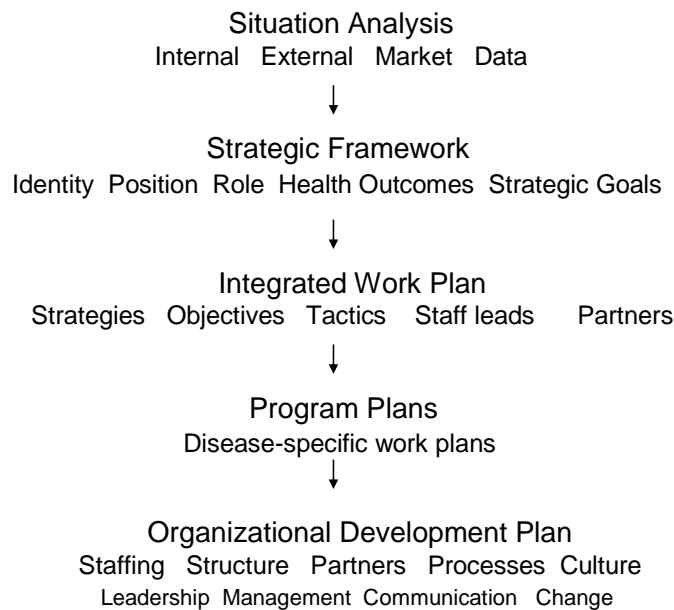
Systems Thinking

- Systems thinking inspired by theoretical biologist Ludwig von Bertalanffy in 1950s
- Organisms must adapt to a constantly changing environment – feedback mechanisms are critical
- Systems have inputs, processes, outputs, and feedback loops
- All pieces are interconnected. Dynamic equilibrium: change in one part requires equal and opposite change in another
- Diverse systems are stronger
- The discipline of organizational development defines (organizational) systems change

***Public health agencies working on systems change require systems change within the agency.
OD is a tool to bring about that systems change!***



Planning Framework



	Name	Definition	Example
Why ↑ ↓	Impact	What difference do we want to make?	Eliminate health disparities related to chronic disease
	Goal/ Outcome	What is achieved as a result of strategies and actions in specific, measurable, attainable, realistic, time-framed terms?	Decrease prevalence of obesity by 10% among African American women in three high disparate counties
How	Objectives / Strategies	A program or group of activities that says how you will achieve a goal; not all things, but the best, most effective way. (Best practices are examples.)	(systems change) Insurers to cover medical counseling for obesity
	Activities / Tasks	The primary activities that need to be completed to achieve the objectives.	<ul style="list-style-type: none"> • Define the problem • Identify key partners • Partner with black health organization / health disparities groups • Etc.

The Road Map for Creating a More Integrated Chronic Disease Program

Task	Purpose/ Description	Outcome
Situation analysis	To provide the context for strategic decisions. Includes data, statistics, trends, State focus and priorities, operating context	Situation <u>analysis</u> – analysis of current state of affairs and need
Strategic framework	To provide the foundation for all strategic decisions. Includes explicit decisions re: impact, position, brand; State distinct role, agency-wide goals.	1-2 page strategic framework – touchstone for all decisions
Integrated (agency wide) work plan	To provide a single agency-wide plan of action to achieve strategic goals. Used as the basis for transitioning from categorical program work to more integrated work. Includes the strategies / objectives / projects to achieve goals.	Integrated work plan
Activity prioritization – what not to do	Using the framework and work plan, define what is least important and what does not get done in an integrated organization	Definitive, agency-wide understanding of what NOT to do, transition out of or change
Staffing analysis	Staff functions, skills needed to implement plan. Gaps and surpluses. Provides guide to how to reallocate staff time.	Staffing needs / surpluses, basis for new job design / descriptions
Resource allocation and alignment	Integrated plan implications to resources	Resources needed or available
Structure	Organizational redesign to facilitate the accomplishment of strategic goals	Organizational structure
Partnerships	Redefine partnerships to align with integrated plan	Deliberate, effective partnerships towards outcomes
Projects	Move from programs to projects. Projects with end results, outcomes, and specific time frame.	Specific results
Alignment and development	Continue to align staff, resources, and partners. Develop the organization to achieve results.	A highly efficient, high performing operation

Section II: The Integrated Work Plan



“The essence of strategy is choosing what not to do.” (Porter)

Form follows function: what are we integrating for?

Key Concepts

- Teams provide value in creating comprehensive plans; but groups of people are not always teams
- The planning process is about making decisions and choices based on context and analysis; an integrated approach requires integrated data
- The plan must define results to be achieved, with strategies and tasks designed to best achieve those results
- Starts at a strategic level and sets a few well defined goals; planning is about focus
- Implementation requires project management and coordination skills, and being accountable to the plan
- Sustainability is more than money – it is a solid identity, engaged constituency, and potent capacity – all of which build brand
- Start with the end in mind – What difference do we COLLECTIVELY want to make in the world? What is the impact we want to have and how will we do that given limited resources?

Planning is strategic decision making. It is an internal process that looks at who you are and what you do. It is informed by your environment and stakeholders but it is a different process than planning as public / partner input.

The Planning Process

- Pre-Planning
 - Purpose and audience (Who will implement and be accountable for outcomes?)
 - Leadership and decision makers
 - Planning team
- Analysis
 - Community need
 - INTEGRATED DATA
 - Trends and best practices
- Decisions
 - Impact
 - Target markets
 - Distinct role and competence
- Goals
 - HEALTH OUTCOMES
 - Strategies to achieve outcomes
- Project planning
- Organizational alignment and development
- Partner alignment
- Implementation and change management
- Monitoring and evaluation
 - Mid-course correction
 - Can't measure outcomes if don't have outcome goals

Health Outcomes

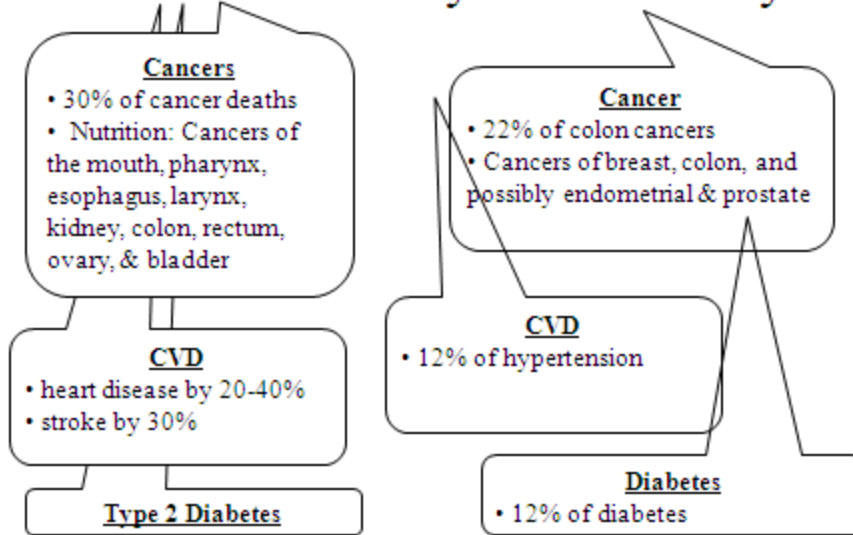
- Cross disease
- Agency wide
- Based on data and need
- Deliberate, strategic, the handful of things we can / must achieve to have impact (not all the activities or the broadest umbrellas)
- Should focus work- help us say no

Integrated Data

- Trends are more important than data points
- Relationships between risk factors and chronic diseases
- Co-morbidity and co-mortality data
- Useful population data i.e. disparate populations
- Note: just because we have some data (i.e. BRFSS) doesn't mean it is useful



Nutrition & Physical Activity



Source: Select Chronic Disease Risk Factors & Outcomes for Colorado Adults. CO Dept. of Public Health & Environment. Shupe, Gabelle & Kaplan, June 25, 2008

Analysis: What does it mean?

- Context for decision making
- Data collection vs. analysis
 - Analysis - the examination and evaluation of information and data to select the best approach given various alternatives
- Define the critical, most pertinent issues and relevant statistics

Should be able to answer:

- What are the strategic issues that emerge from the data?
- What are the influencing trends and factors?
- What are the most critical and unmet needs?
- What is our distinctive competence or assets?
- What are the root causes?
- What obstacles do we need to overcome to have an impact?
- Who is our target market and what are their needs or obstacles to desired behavior?
- What is the most significant new data or best practices?
- What is the system? Who are the competitors and collaborators and what are they doing?

Decision Making: The Planning Session Agenda—Sample

Purpose

- To create an integrated plan that will guide the work of the agency and its partners to achieve specific statewide health outcomes
- To create an agency-wide integrated approach for greater efficiency, effectiveness and equity

Outcomes

- Strategic framework and agency-wide health outcomes
- Integrated action plan

Agendas

Strategic Framework (management team)

- Introductions and overview
- Definitions and frameworks
- Agency operating environment and vision
- Situation and integrated data and analysis
- Strategic decisions
- Agency-wide, cross disease health outcomes
- Process and next steps

Integrated Action Plan (all staff)

- Introductions and overview
- Agency operating environment and vision
- Integrated data presentation and analysis
- The integrated framework and outcomes
- Integrated action plan (strategies and projects)
- Strategic partners
- Implications
- Summary, next steps, closing remarks

Strategic Framework: Sample Outline

Description

- What is the agency as a collective whole? Why do you exist?

Criteria for Success

- By what measures will we calibrate success?

Scope

- What is the entity we are trying to integrate?
- Consider
 - Role
 - Sphere of influence
 - Primary stakeholders
 - Non-negotiables / “sacred cows”
 - Non-negotiable mandates
 - Tolerance for creativity, risk, change

Result

- The ultimate long-term result

Impact

- What difference will you make?

Target Markets

- Who is the target market, area of focus?

Imperatives

- Given all of the above, what must you do to be successful in the next three to five years?

Outcomes

- Turn imperatives to outcome goals: what will you achieve in the next three to five years?

Integrated Action Plan: Sample Template

Goal:

Objectives	Primary Strategy	Lead Staff	Disease/Program Involved	Primary Partner

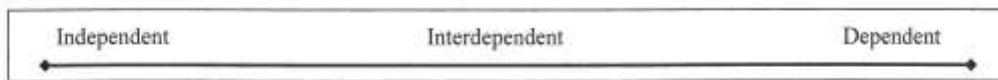
Planning and Partnerships

Your strategic plan defines your partnerships. What are you going to achieve and who do you need to be successful?

- Shift from hundreds of partners to more deliberate, defined partnerships
- Distinguish between stakeholders and strategic partners
- **Strategic Partnership:** *a specific and defined type of partner relationship; interdependent, requiring an explicit and more formalized relationship*
 - Deliberate and necessary to achieve public health goals and outcomes given the current context
 - Includes an agreement between two or more entities stating that the involved parties will act in a certain way in order to achieve a common goal
 - Must be deliberately defined, developed, managed and monitored
 - Cut across types / segments of partners. For example, some contracts / advisory groups, etc. are more strategic than others
- Define strategic partners to strategy and outcome
- Note: A truly integrated operation would NOT have disease specific advisory groups or councils
 - See WV diabetes / CVH example
- You must align partnerships to the plan
- The integrated work plan provides meaning to partnerships

Partner Relationship Continuum

Relationship



Synergy



Structure / Connection



Examples



Description

Environ.	Totally separate working environments	Likely to maintain separate environments and identities, with some overlap	<i>Shared environment influences success</i>	Cultures / environment merge or meld
Collabo-ration	Exchange of information	Work together are discreet projects or tasks	<i>Synergistic and complementary skills / assets</i>	Fully integrated systems and operations
Goals	Shared interests but separate goals	Work together on some shared goals	<i>Goals developed together</i>	One set of goals
Success	Success independent of other	Shared success or failure on team components	<i>Success depends on other</i>	Success and failure is one and the same

The location of a partnership along the continuum defines the type of working relationship and the extent of involvement and connection

Partner Typology

Segment	Description	Primary Role	Type of Relationship	Process
Contractors	Hired in lieu of staff for specific expertise to carry out a defined set of tasks and produce specific products	By specific scope of work and contract	Contractual	Managed and held accountable by lead staff
Grantees	Receive grants to further health outcomes	By grant application and award	Grants management	Held accountable to grant requirements
Advisors	Hold critical information or expertise necessary to complete work	Advise and guide policies and practices	Advisory	Typically in form of committees and meetings, but could be more deliberate and systematic
Implementers	Those entities necessary to carry out tasks; work is considered integral to what they already do or why they exist	Perform specific duties through ongoing work on behalf of organization	Generally informal relationships but could be more formal	Less formal, but needs more explicit definition
Community Networks	Those entities or individuals who have specific connections in the community or with a population to be influential	Outreach arm of the organization or agency	Advisory and potential implementers	Very fluid, need more definition
Oversight	Assigned by law, grant, or regulation to oversee and regulate activities	Oversight or regulation	Compliance	Structured
Advocates	Related to work; vested interest or agenda to be met	Supports a particular interest or position	Informal	Generally reactive or in planning processes
Other				

Summary: Good Plans

- Based on data and analysis
- Plans as positioning tools – define why you are critical and indispensable
- Must carefully define the job to be done
- Represents deliberate decisions and choices (i.e. what *not* to do)
- Defines target markets and who you will serve (not everyone)
- Developed by steering committee, not all stakeholders or grant recipients who by definition cannot make *strategic* decisions
- Role of health departments as leaders (setting the agenda) vs. facilitators
- Not an umbrella under which anyone adds their activity
- Requires alignment of systems and processes, i.e. partners and grantees

Section III: Organizational Alignment



Creating an integrated chronic disease program is, by definition, a systems change approach. If you change your strategies, there must be a change in your systems, structures, staffing, culture etc.

Systems Change Overview

- System-wide sustainable change
 - Define the desired change
 - Define the system (systems are at varying scopes and scales)
 - Define leverage points / points of influence within that system
- By definition, systems change is a comprehensive approach (can't do it partially! The "emulsification" thing)
- Public health seems to define systems change as policy, higher level change or getting more (non-traditional) groups involved in bringing about health outcomes
- Policy is one way to bring about change throughout a system, but there are other ways to change a system
 - Incentives or disincentives: providing free curbside recycling; increasing the price of cigarettes
 - Chronic disease integration – change silo'd funding
- There are obstacles for public health practitioners to achieve systems level change
 - Can't do systems change with programs; requires new approaches, different skills and tools
 - System influencers are outside your sphere of influence
- It takes time... unlikely to be able to measure outcomes by quarter or by year

Systems change is not a solution for all problems. It is a specific strategy for a specific set of problems and conditions.

Characteristics of Systems Change

- Substantive
- In depth (go deep)
- Takes time
- Complex
- Dealing with many interlocking (entrenched) systems

Organizations as Systems

Components	Definition	Includes	Tools for Change
Practices	The fundamental description and purpose and how the organization conducts its work.	Defined by mission, vision and values. Carried out through goals, methods and strategies.	<ul style="list-style-type: none"> • Strategic, long-term planning • Goal and outcome clarity • Evaluation and logic model • Project management • Quality improvement processes
Structure	The fundamental shape of an organization, where functions, reporting relationships, and lines of communication are placed.	Most commonly defined by the organization chart. The centralization and decentralization of functions, integration and coordination, authority, responsibility and accountability.	<ul style="list-style-type: none"> • Organizational / coalition re-design • Reporting relationships • Responsibility and authority link
Competencies	The ability and resources available to carry out core functions.	Includes organization's real and perceived skills, abilities, and aptitudes. Generally defined by staffing patterns - having the right number of people with the right skills - available to do the right work. Includes issues of professional development, employee and volunteer satisfaction and safety and succession.	<ul style="list-style-type: none"> • Human resource planning (needs, gaps, surpluses) • Job design / redesign • Training and skill building • Role clarity • Performance management • Rewards
Systems or Processes	Those tangible and intangible, formal and informal processes or procedures that facilitate practices and ensure consistency, accountability, historical integrity, and organization sustainability.	Includes management information systems (financial, contacts, human resources, etc.) and how those systems are integrated. Also includes evaluation and performance appraisal systems and processes, project approval processes or resource allocation processes, workflow and decision making processes.	<ul style="list-style-type: none"> • Learning organizations / communities (how information is shared) • Communication systems • Decision making • Conflict management and negotiation processes
Culture	Collective attitude, values and style. The style or personality that permeates an organization. Shaped by the written and unwritten rules of behavior, leadership style, history, and assumptions that are passed between employees.	Includes the policies, rules, and patterns of behavior and adaptation, rituals and assumptions. Demonstrated by language, style, and habits.	<ul style="list-style-type: none"> • Leadership • Incentives, rewards • Disincentives, consequences • Tools and resources • Teams • Management skills

There is no one right answer. It depends on where you are and where you are going. But at some point, it is not a matter of opinion or preference, there is a right answer based on best practices.

Organizational alignment is typically a task for the leadership team.

Do not try to undertake a systems change process / organizational alignment without leadership skills and functions of management being carried out.

Key Components for Alignment of the Integrated Organization

Leadership

- Focus on the overall organizational development with full understanding of how all the pieces need to work together and ensuring the foundation to make it work
- Leadership provides content expertise and oversees program integration implementation
- Define what the agency stops doing or does less of
- Demonstrate leadership behaviors and best management practices

Program Management

- Define role of managers in communicating strategic plan
- Enhance learning about change management
- Set standards for program managers across the board
- Clarify role of program managers re: balancing current and integrated work plans
- Clarify functions and responsibility of management

Staffing

- Define staffing needs and gap analysis
- Create new position descriptions
- Define latent skills / abilities / interests
- Create human resources plan to alleviate surpluses and fill gaps

Partnerships

- Define partnership needs and gaps
- Refine roles
- Define deliberate composition to achieve health outcomes
- Manage relationships based on partner continuum (i.e. not all partners are equal)

Resources

- Define realistic budget and make adaptations
- Reallocate resources based on plan / projects
- Integrated fund (on paper) for tracking the whole

Communication and Change

- Focus communication on the integrated work plan
- Continue to develop understanding of diverse communication styles to support a full diversity of opinion, perceptions, and styles in the workplace
- Use communication as a tool to create a learning environment, build trust and full transparency, and be accountable for what we communicate about and how
- Employ best practices of change management

Organizational Alignment Tasks

	Tasks
<u>Planning</u>	Define programmatic implications of integration plan
	Review related documents and design process / materials for all facilitated meetings
	Finalize integrated plan and create final document
<u>Organization Alignment</u>	
<i>Staffing</i>	Identify functions, skills, and positions
	Identify skill and position gaps and surpluses
	Create sample position description templates
	Create plan / implementation schedule to fill gaps
	Define professional development opportunities to fit needs
	Develop professional development criteria and accountability systems
<i>External committees</i>	Define partners and redefine composition, role, and outcomes for partners / stakeholders
	Create charters for external committees and groups
	Define external group composition
	Define necessary strategic partners
<i>Structure</i>	Define structure success criteria, create and present models
	Design structure to facilitate team work, integration and efficiency
<i>Financial</i>	Create “zero-based” budget, define real budget allocation
<i>Systems</i>	Define systems, technology, data to facilitate organization development and team work
	Guide plan for systems improvement / redesign
<i>Plan</i>	Complete organizational development plan to reflect decisions / work above
	Finalize organizational development plan
<u>Communic.</u>	Define internal and external markets
	Define communication goal, objectives, message
	Create market specific strategies
	Complete communication plan and implementation
	Analyze and adapt communication materials
	Facilitate internal communication
<u>Leadership</u>	Define agency leadership roles, responsibilities
	Create leadership position descriptions and necessary competencies
	Facilitate leadership skills self-assessments and training
<u>Mgmt. Team</u>	Define management roles and responsibilities
	Define “learning organization” model for information sharing
	Provide management training and development
	Ensure best management practices throughout team

Principles of Organization Structure / Redesign

Design Issues

- Division of labor (low to high specialization)
- Authority (low to high delegation)
- Departmentalization (homogenous to heterogeneous)
- Span of control (few to many)
- Flexibility (low to high customization)
- Age, experience, professional credentials of staff
- External oversight and internal accountability
- Culture and prevailing values (i.e. team vs. individual competition)
- Form follows function

Departmentalization

- Functional (direct service, accounting)
- Programmatic
- Geographical
- Customer group
- Grant source

Advanced

- Matrix
- Integrated
- Cross-agency teams

Organizational Redesign Considerations

- In order to be most effective and efficient, what are the primary functions that must be carried out?
 - Functions are groupings of activities or tasks such as public relations
 - A function requires a specific set of skills and has a variety of tasks
- What characteristics and competencies are most important for all staff, in addition to specific technical or programmatic skills?
- What criteria or parameters should be considered in designing the organization for efficiency and effectiveness and productivity?
- Where are the overlaps or duplication in functions or roles?
- Where are the opportunities for economies of scale?
- How can you leverage strengths and assets to be more efficient?
- What must stand alone; what could be integrated?

Tying it all together: Integrated Work Plan and Organizational Alignment

- I. Executive Summary
- II. Introduction
- III. Frameworks
 - A. Definitions
 - B. Underlying principles
- IV. Integration planning
 - A. Data and information
 - 1. Situation analysis
 - B. Strategic framework
 - 1. Health outcomes
 - C. Integrated work plan
- V. Organizational Alignment
 - A. Leadership and management
 - B. Staffing
 - C. Culture
- VI. Leadership and management
 - A. Functions, roles, responsibilities
 - B. Positions and structure
 - C. Decision making authority, style, accountability
 - D. Communication
- VII. Staffing
 - A. Functions and position descriptions
 - B. Gaps, surpluses and filling gaps
 - C. Empowerment, responsibilities and accountability
 - D. Communication – learning and information sharing
 - E. Performance expectations
 - F. Reporting relationships
- VIII. Partnerships
 - A. Strategic partnerships
 - B. Advisory / community partnerships
 - C. Stakeholders
- IX. Resources
 - A. Sources of funds
 - B. Annual budget projections
 - C. Integrated budget processes
- X. Change management and transition
 - A. Change processes
 - B. Transition plan and implementation
- XI. Conclusion

Section IV: Managing Change



Considerations

- What is the need for change?
- Does the prescribed change address the problem?
- What changes or adaptations are necessary to be most effective?
- Is there a clearly defined process and timeline?
- What are the direct and indirect consequences of the change?
- Have we considered and involved all that will be impacted by the change?
- Who will be accountable and responsible for the change process?
- How and when will we communicate internally and externally?

Role of the Change Agent

- A change agent intervenes to improve effectiveness
- Brings different perspective
- Challenges status quo
- Depends on quality and workability of relationship between change agent and key decision makers
- Three models: internal, external, internal-external team

What are the opportunities for state public health chronic disease staff to operate as change agents? At what level? What are the obstacles and opportunities?

Leverage Points for Change

- Leadership
 - Behavior of the people in power
- Rewards
 - Compensation (formal and informal)
 - Consequences and repercussions
- Management skills
 - Technical and content
 - People and management skills (i.e. conflict management, negotiation, communication)
- Team building
 - Team members influence each other's work
- Strategy / structure fit
 - How design facilitates accomplishment of strategic goals

- Culture
 - Operating values and philosophy, how we act, not just what we say

Managing Change

(The concepts in this section are adapted from W. Bridges.)

Change vs. Transition

- Change is the situation imposed on us by forces outside ourselves
- Transition is the internal psychological process we go through to adapt to change
- Must go through endings and neutral zone to get to new beginning

Getting through the Wilderness / Neutral Zone

- Help people understand personal transitions as response to organizational change
- Mourn endings and celebrate beginnings
- Be aware of individual transition processes
- Set specific do-able tasks
- Take one step at a time
- Carefully define behavioral expectations
- Acknowledge positive behaviors

Section V: Examples



Section VI: Best Practices in Public Health



Link Responsibility and Authority

- People with the responsibility to do the work must have clearly defined authority, at the appropriate level to achieve that work.

Project Focus

- All staff, with management's lead, to always ask about tasks and decisions: "How does this relate to accomplishing strategic goals (or the integrated work plan)? What outcomes do I need as a result of this action?"

Responsibilities at the Appropriate Level

- Not everyone should be involved in all aspects of the work, or in all decisions or discussions. Leadership operates at the strategic level, management at the tactical level, and staff at the operational (task) level.

Distinguish between Opinion and Fact

- Informed opinions based on fact and expertise should always be encouraged and considered. Be clear about what is informed opinion, facts and data and what is one individual's personal opinion based on bias or self-interest.

Data and Information for Decisions

- To the extent possible, use data and information for decision making. Build the systems necessary to supply that information in a timely and useful manner. Recognize limitations to data and be rigorous about accuracy. (Many discussions go much longer than is useful because the group does not have the information they need.)

Empowerment

- People feel empowered when they are respected and they have control over their responsibilities at the appropriate level. Define staff's "circle of influence" and ensure the resources (tools, information) for them to do their job. Also define what their job is not. Empowerment expects people to bring solutions to the table, not just problems.

Manage to Individual Strengths, Mitigate Weaknesses

- First be clear about individual's strengths and weaknesses. Help people build on their strengths, but recognize and work to improve or mitigate their weaknesses. Help people succeed.

Tasks handled at the Level and Competency Needed to do the Task

- Staff should be fully utilized to their highest capacity. Routine non-specific tasks should always be delegated to the most appropriate level.

Be Consistent about Decision Authority and Style

- Decision authority is defined by role. Be consistent about who makes what type of decisions at what levels. Decision making style should also be defined and consistent.

Make Deliberate Decisions and Stick to Them

- If decisions are made at the appropriate level, using informed opinion, data and information and in the style agreed upon, then the decision is a deliberate decision.

Paper/ Documents pass through as Few Hands as Possible

- A basic efficiency and time management principle; streamline how many people have to see or approve something. Who needs to know or sign off?

Walk the Talk

- Be clear and transparent about what you are doing and why. Be consistent. Do what you say. This usually applies to leadership, but is just as important for all staff.

Communicate Often

- Focus communication; be clear about what the message is and the purpose of the communication. Stay on message and stay on point. Listen and respond, but focus communication: “How does this achieve health outcomes?”

Managers Role is to Manage Workload

- Project planning, coordination and focus are critical. Manager’s role is to both set an example and help staff define their own priorities and areas of focus and what they can say NO to.

From Number of People to Outcomes

- Public sector organizations will never be at full capacity. Switch the dialogue from, “How many people do I need?” to “What products and outcomes must we have?”

Engage Partners around Outcome

- Be clear about the purpose and outcome of a partnership. Keep deliberate and defined and work together to outcome.

Information Sharing Not Meetings

- There are many more efficient ways to simply share information than to have meetings. Establish systems for posting or distributing information and rely on managers to communicate with staff. Individuals must take responsibility to stay relevant with information pertinent to their jobs.

Make Meetings Meaningful


- Meetings must be purposeful and deliberate. Define the purpose of the meeting, what is the necessary outcome (discussion, action, decision) and then determine who needs to be in attendance.

Team Building

- Teams get built by people working together and contributing their own strengths towards a common outcome, and working through their challenges and obstacles towards solutions. Teams get built by people accomplishing meaningful work.

Integration

- Integration is a way of thinking and being. It is about understanding the relationship of all chronic diseases and risk factors and about clearly defining partnership (internal and external) to get the work done in a streamlined and efficient way.



Nonprofit Impact provides consultation and training to organizations and agencies dedicated to community and public health, education, and human services. Our staff are experienced professionals with nonprofit management and public administration expertise.

We help organizations, agencies, and programs achieve results and develop leaders, staff, and volunteers to create more productive and satisfying operations. Our services include strategic planning and positioning, marketing, fundraising, and organizational analysis and development.

Our sister company, Conservation Impact, is dedicated to helping organizations achieve results towards environmental conservation and resource sustainability. Together, the two companies have worked with nearly 500 organizations on more than 765 projects.

For more information about the company, our services, or our team, please call us at 303.223.4886 or visit us online at www.nonprofitimpact.com.



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