MANAGING CHANGE AND LEADING THROUGH TRANSITIONS

A Guide for Community And Public Health Practitioners

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Developed in partnership with Community Initiatives

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INTRODUCTION

Practitioners in the public and private sector working to lead community and public health efforts are challenged more than ever to have and effectively apply a broad range of internal and external skills, competencies, and capacities in their daily work. From subject matter or settings expertise, internal management and budget oversight, grant proposal and plan development, and evaluation to name a few; with the added complexity of developing and managing extensive multi-sector partnerships, the scope of skills needed for this work are diverse and demanding.

As if mastering these skills and leadership capabilities aren't enough of a challenge, today's practitioners are additionally faced with leading public health efforts amid ever-changing political landscapes, organizational structures, resources, funding streams, and partners. Whether change involves establishing a relationship with new government officials, re-organizing or integrating program areas, shifting gears with a new grant opportunity or sustaining efforts when there is a gap in funding, practitioners today are juggling the responsibility of leading community change on one hand while having to manage internal and external change on the other. Although dealing with change and transition are not new issues, the impact of these common scenarios, if not managed effectively, can significantly impact the ability to advance and sustain public health improvements.

As more community and public health initiatives have been launched across the country, there has been a significant increase in training and technical assistance provided to practitioners by experts in the field to help them accomplish this work. While a great deal of this training has been focused on specific subject matter or topic areas related to environmental and systems change, which is important, there is a lack of specific information and assistance related to addressing change and sustaining community-level efforts. For practitioners, this void often leads to uncertainty, instability, and disjointed efforts. This guide was developed to bridge this gap in information and provide an introductory resource on the topics for practitioners to draw from.

Information for this guide was drawn from the vast business literature on change management and organizational change, in addition to resources from public health and public sector management. Once compiled, the resources from this interdisciplinary base of knowledge were filtered for information that is relevant and specific to professionals in public and not-for-profit settings from those that are specific to private sector environments only.

PURPOSE OF THIS GUIDE

This guide is not meant to be a comprehensive tool or road map, but a useful resource to

- introduce and increase awareness about the core concepts of change,
- highlight the types of change that practitioners often face,

provide practical strategies for transitioning through these situations more effectively.

INTENDED AUDIENCE

This guide was developed with a focus on community and public health practitioners in leadership positions as the primary audience (e.g., directors, program managers, subject matter or task leads, and key partners); however, the information is relevant and valuable for practitioners in any position. Whether you are leading change or being impacted by change, the information in this guide will help you gain a better understanding of what it takes to deal with change from various perspectives and roles.

RECOMMENDED USES

While each section of this guide contains practical information for practitioners, the guide has been developed to allow readers to either review specific sections individually or read the guide in full for a more comprehensive overview. However, to gain baseline knowledge of the core concepts of change, readers should review information in Section 1: Managing Planned and Unplanned Change and Section 2: Leading Through Transition.

This tool was developed with support from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

Users of this document should be aware that every funding source has different requirements governing the appropriate use of those funds. Under U.S. law, no Federal funds are permitted to be used for lobbying or to influence, directly or indirectly, specific pieces of pending or proposed legislation at the Federal, State, or local levels. Organizations should consult appropriate legal counsel to ensure compliance with all rules, regulations, and restriction of any funding sources.

SECTION 1: UNDERSTANDING AND MANAGING PLANNED AND UNPLANNED CHANGE

"Change is the only constant."—Heraclitus, Greek Philosopher

Across the vast knowledge base of information about change management, the large majority of available resources available provide detailed information and frameworks about how to manage and lead planned change. Planned change may include scenarios such as implementing a new strategic plan, restructuring an organization to facilitate collaboration across program areas, or launching a new reporting method. While leading planned change is not without challenges, there are many well-established systematic approaches that practitioners can draw on to assist with this type of change. However, there are also situations in which practitioners are confronted with unplanned or unexpected change. While planned change typically has an expected result of leading to some type of improvement, unplanned change can be chaotic and lead to unknown results, or can even lead to an unexpected success.

Whether change is planned or unplanned, it is typically something that happens to people, whether they agree with it or not. As illustrated in Figure 1 below, regardless of the change scenario, there is a transition period that people go through before moving into either the expected improvement or new situation.^{1,2} While change sometimes happens quickly, transition usually occurs more slowly. To work through and possibly capitalize on the impact of change, practitioners must not only manage change but provide the leadership to transition through change.

Planned Change Plan Transition Expected Improvement

Unplanned/ Unexpected Change Plan Transition Transition New Situation/ Direction +/-

Figure 1: Planned and Unplanned Change With Transition Phase

STAGES OF CHANGE AND THE TRANSITION MODEL

Significant change (e.g., losing a valued colleague due to a loss of funding or having a program area dropped) can elicit the same type of response that one would experience in the grieving process. In the workplace, these stages may include shock, defensive retreat (i.e., defying change), acknowledgement, and finally acceptance and adaptation.³ Progress through these stages is linear, and people often go through these stages at different rates. Similar to these stages, noted change consultant William Bridges, PhD, developed a model that further describes

the stages that people go through when they experience change, but also adds strategies for helping people transition through each stage. Known as the *Transition Model*, there are three stages of change as illustrated in Figure 2 and described in the following.

Figure 2: The Stages of Change of the Transition Model

Stage 1:

Ending, Losing, and
Letting go

Stage 2:

The Neutral Zone

The New Beginning

Stage 1 Change: Ending, Losing, and Letting Go

When first presented with change, people move into Stage 1. This stage is often marked with emotional upheaval and resistance, because people have to let go or give up something that they are comfortable with or that is routine. Some may get stuck in this stage for some time, and may even exhibit active resistance throughout the change process if their feelings about the situation are not acknowledged.

Stage 1 Transition Strategies: Listen and Communicate

Even if people are initially resistant to change in Stage 1, it is important to understand their emotions and allow them time to let go. Listen intently, communicate openly, and assure people that they will have the support they need to work in the new situation. Given that people often fear what they do not understand, educate them about the positive aspects of the change and communicate how their knowledge and skills are going to be an essential part of it.

Stage 2 Change: The Neutral Zone

People most affected by the change are often confused and uncertain during this phase. In fact, in Stage 2, they may experience a higher workload as they work to get used to new systems and new ways of working. This phase is the bridge between the old and the new, which will result in mixed emotions. While this can be an extremely trying time, it can also be a time of great creativity, innovation, and renewal.

Stage 2 Transition Strategies: Support and Guide

Providing support and guidance through Stage 2 is essential. Because of the higher workload and possible new processes, people may feel unproductive during this time and feel as though progress is not being made. To move through this stage, it is important to provide solid direction, frequent

feedback, and short-term goals for a few quick wins. It may also be important to deprioritize some work or provide extra assistance to staff to help manage the increased workload.

Stage 3 Change: The New Beginning

Stage 3, the last of the transition stages, is one of acceptance and new energy. People have started to embrace the change initiative because they have begun to build skills to work in a new way and they are starting to see some wins from their efforts. Most importantly, at this stage, people experience a new commitment to the group or role.

Stage 3 Transition Strategies: Celebrate and Commit

Being able to sustain the renewed commitment during this phase is essential. Take time to celebrate the change that everyone has gone through and reward groups for their hard work. It is also important to remember that not everyone will reach this stage at the same time and that there is the possibility that people will slip back in stages if you do not continue to embrace the change and provide support.

While the transition model is outlined relative to managing internal transition, the concepts and strategies of each stage can also be applied to the work that practitioners do in leading and managing change with external partners.

SECTION 2: LEADING THROUGH TRANSITION

As practitioners today work to manage the many forces of change coming at them in their work environment, many of which are out of their control, they are also charged with acting as change agents leading change at the community level. To manage these challenges and lead effectively, practitioners must become more adept at recognizing change, more aware of the issues that come with creating change, and more proactive in providing the leadership necessary to transition through these periods. One of the most important initial steps that a practitioner must take is to recognize critical change situations as they present themselves. According to Christine Riordan, PhD, a management and leadership expert,⁴ a leader's ability to navigate transition points occurs on three levels:

- 1. *Staying ahead*—These practitioners recognize transition points and navigate changes in advance. Therefore, they are able to maintain a high level of performance and lead others effectively through these transition points.
- 2. *Keeping up*—While these practitioners recognize transition points, it is typically as the change is happening; therefore, there may be a slight adjustment and dip in their performance before they respond. Overall, they are able to recover and get the staff and structure back on track over a relatively short time period.
- 3. *Falling behind*—Although not intentional, some practitioners are not prepared or fail to recognize critical change or transition points and therefore, do not respond appropriately. Although some leaders in this role are shifted out of their position, generally, the

To assess your level of readiness and ability to navigate change, use the assessment tool developed by Dr. Riordan featured in the Appendix.

organizational structure and leadership is not able to keep up with the change in landscape. Ultimately, this impacts the ability of the organization or agency to move forward effectively. If the situation continues for a period of time, it may result in significant damage to community partnerships and commitment to the overall effort.

Regardless of the level of response to change, practitioners are challenged with determining how to maneuver through these issues while continuing to move community-level efforts forward. Leadership expert Tom Stevens has identified the following practical strategies to help professionals in leadership positions transition through change more effectively.²

• Communicate, communicate, then communicate some more—Change creates a craving for information, especially change that has potentially negative consequences. While you should

do everything to meet the insatiable need for information and support that often happens during these times, it is also critically important to safeguard integrity—do not make promises you cannot deliver or control. Share honestly when you do not know the answer for something, assure people that you will communicate when the information is available, and be sure to follow up.

- Make procedures and processes temporary or trial-based (encourage agility)—In the early stages of change, people are usually reluctant to adopt new procedures when things are uncertain. Unfortunately, this attitude comes from an expectation that all processes and structures are permanent. Explicitly stating that processes or structures are temporary may set a more realistic expectation and set the stage for easier buy-in with future change.
- Match your actions to the current state of transition—When things change, people shift from being in a routine to other transitional states, including ending (a time of dealing with loss), abeyance (a time of waiting and low energy), and starting (a time of high energy and looking toward a different future). It is important to note that these are states and not stages because people do not necessarily follow these in order. Assessing the state of staff or partners allows leaders to match their actions to the meet these needs. The ending state requires more information dissemination, the abeyance state requires more structure to help people get through the day, and the starting state is the time to engage people in planning (and working to get some solid successes quickly). One caveat—leaders often assume that everyone in an organization is in the same state of transition, and this is rarely the case. Higher-level leaders should pay extra attention to mid-level managers who are often caught between leaders in a high state of readiness for change (starting), while trying to manage a group of people still struggling with an ending state.
- *Deal with emotions*—Savvy leaders make emotional responses consistent with states of transition. Leaders who acknowledge people's feelings in the ending state will gain more buy-in when moving into a new beginning.
- Ensure time for real conversations—Take time to discuss tough issues even when there are no answers available. Cultivating healthy informal conversation is important and will prevent issues from festering. Honor dissension and disagreement, but address toxic dysfunctional and unethical behavior immediately.

Lessons From the Field: As a major grant funding period was coming to an end and some grant staff members were faced with having to look for new positions, management staff from a large-scale community initiative worked to ease the pressure of the situation by allowing and encouraging staff members to have open discussions about potential jobs and other opportunities. This helped team members whose positions were at risk feel supported and valued, and also allowed permanent staff to feel as though their fellow team members' needs were being addressed.

- Mark major changes and celebrate milestones—Remember that starting and ending times are both important. Acknowledging both in special ways helps people make transitions more easily and quickly.
- *Find the right metaphor*—A meaningful metaphor can help people find direction in a time of transition. Consider a group of people in transition working their last month before a program is discontinued. While the given realities may remain unchanged, the positive organizational impact of viewing themselves as being "on a proud ship making a final voyage" versus thinking they are "on a sinking ship" can be significant.

LEADING AND MANAGING

Practitioners leading community and public health efforts have a wide range of knowledge and skills and come from a variety of backgrounds. Whether they have deep expertise in a subject matter or setting area, in-depth knowledge of management, or some type of technical training, they must possess the ability to provide both leadership and management to be successful. The skills to organize, plan, and manage large-scale initiatives while being able to mobilize and inspire internal and external partners are key for leading community health efforts. These key skills are also essential for being able to navigate and transition through the constant change scenarios that come with this work. According to Warren Bennis, PhD, a noted leadership expert, "Leadership is doing the right thing, management is doing things right." Good leaders—at whatever level in an organization—understand and are able to achieve a balance between leading and managing.⁵

John Kotter, PhD, leadership and change expert outlined the relationship of leadership and management in a two-by-two matrix (see Figure 3).⁶ As illustrated in this matrix, balancing leadership and management is critical to successfully achieving a change or transformation initiative. While short-term results are feasible with effective leadership or management, long-term transformational success cannot happen without a combination of the two.

Figure 3: The Relationship of Leadership and Management 6

+ Leadership; - Management	+ Leadership; + Management
Transformation efforts can be successful for a while, but often fail after short-term results become erratic.	All highly successful transformation efforts combine good leadership with good management.
- Leadership; - Management	- Leadership; + Management
Transformation efforts go nowhere.	Short-term results are possible, but real transformation programs have trouble getting started and major, long-term change is rarely achieved.

In addition to understanding the balance between leadership and management, it is also important to recognize that although they do interact, the skills needed for each dimension are not the same. To identify and differentiate the multifaceted skills for each, Louis Rowitz, PhD, an expert in public health leadership development, developed a management and leadership continuum that outlines these skills. As illustrated in Table 1, the continuum features the basic skills that are essential for management as well as the potential range of skills involved with various types of leadership styles. While the skills of traditional management still apply, clearly these skills alone are not adequate for leading the type of community health work that today's community and public health practitioners are engaged in. This information is not intended to imply that practitioners need to possess proficiency in all of these leadership skills but to illustrate the potential range of skills and activities that they might draw from to lead effectively. The skills across this continuum, including the management skills, are interrelated and have applicability to many different aspects of community health work.

Table 1: Management and Leadership Continuum With Skill Sets

Management	Organizational	Transactional	Strategic	Transformational
Skills	Leadership Skills	Leadership Skills	Leadership Skills	Leadership Skills
 Planning Organizing Staff mgmt. Controlling Budgets Business plans Conflict mgmt. 	 Developing others Coaching Mission/vision Matrix structures Portfolio mgmt. Team building Problem solving Decision making 	 Relationship building Collaboration Communication Sharing power and influence Developing collaborative structures 	 Systems thinking Strategic planning Stakeholder analysis Negotiation Policy analysis Futures orientation Analytic 	 Paradigm busting Policy innovation Change orientation Complexity thinkers Systems transformation

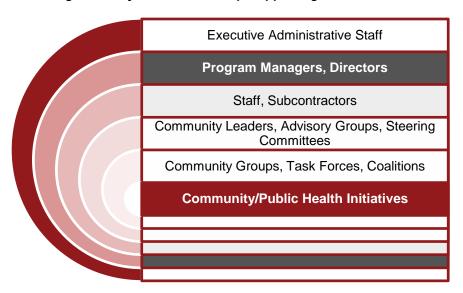
Following is a brief summary of each style of leadership as described by Dr. Rowitz:

- Organizational leadership—The people factor is central to this leadership style. The
 organizational leader understands the importance of vision, modifying organizational
 structures for quality improvement, and team building for the sharing of power. Importantly,
 in this style, there is recognition that the organization needs to work in the external
 environment to create change.
- *Transactional leadership*—Collaboration, building relationships, and sharing power and influence are important skills for the transactional leader. Exploring and using all types of communication approaches to support and maintain these relationships is key.
- Strategic leadership—Implementing change and systems thinking are central to providing strategic leadership. Strategic thinking involves using methods to make policies and programs work and using data and tools to aid in decision making.
- *Transformational leadership*—Transformational leaders are complex thinkers with the goal of transforming systems. They know how to select the right partners to be involved in policy and programmatic change and are primarily focused on outcomes.

TAPPING INTO LAYERS OF LEADERSHIP

One of the distinguishing features of public health work is the widespread involvement of partners and leaders from multiple sectors and levels of influence. As depicted in Figure 4 and described in the following, the involvement of partners from various levels of the lead organization and the community represent the *layers of leadership* necessary for successful implementation and sustainability of public health initiatives. While these layers illustrate an impressive amount of support and influence, practitioners leading these efforts (e.g., program managers and directors as highlighted in Figure 4) are ultimately responsible for ensuring that there is effective collaboration, communication, and coordination between and among the various partners in order to accomplish the objectives of each initiative. As outlined earlier, this requires that practitioners have a strong combination of both leadership and management skills. With strong leadership and management, partners across the layers of leadership are not only able to strengthen the potential reach and impact of initiatives, but can also provide a powerful buffering effect when change occurs at any of these levels. This widespread support and the buffering effect it offers is essential for sustainability.

Figure 4: Layers of Leadership Supporting Public Health Efforts



Layers of Leadership From the Lead Organization (e.g., agency, organization, or foundation):

- Executive administrative staff—Secretary of health, health commissioner or officer, executive directors, health department branch chiefs, assistant commissioners, and others.
- *Program managers, directors, or other team/task leads*, also known as practitioners (the primary lead/manager of the action plan and coalition).
- *Core, dedicated staff* based out of the designated community home (e.g., agency, foundation, not-for-profit organization).
- *Vital partners and subcontractors* who are responsible for delivering major aspects of the action plan/strategies (e.g., school lead, worksite director, hospital manager).

Layers of Leadership From the Community:

- Community leaders, advisory groups, steering committees—Influential community members from a variety of sectors who have committed to a leadership role; may also include representative(s) from lead organization.
- *Community groups, task forces, coalitions*—Community members from a variety of sectors that support and assist with the implementation of strategic action plans (this includes representation from multiple coalitions across initiatives or strategic focus areas [e.g., obesity prevention task forces, comprehensive cancer coalitions, tobacco prevention and control coalitions]).

SECTION 3: TYPES OF CHANGE AND TRANSITION STRATEGIES

While it is not possible to capture all of the different types of change situations that practitioners can and do face, the following section will provide a snapshot of three of the most common and potentially significant change topics areas: political, organizational, and funding change. In addition to providing a brief overview of each change topic, a few practical strategies for transitioning through these change situations effectively will be provided. The types of change and transition strategies outlined in this section are intended to be an introduction to these topics and are not comprehensive in scope. The transition strategies include evidence-based information identified from the literature, as well as a few practice-based examples from practitioners in the field. These strategies are not intended to represent best-practice recommendations, but rather options to consider. Each State and local context may be quite different and present their own unique challenges and opportunities; not all of these situations or strategies may apply. It is also important to note that while change management strategies and skills can help mitigate the impact of change, they are not a cure-all and will not insulate practitioners or programs from the effect of change.

TOPIC 1: POLITICAL CHANGES

Because of election cycles, changes in the political landscape are unavoidable. Whether you work in the public or not-for-profit sector, a political change can impact public health efforts in many ways. Even if a newly elected official is from the same political party as the former, the official will most likely have his or her own agenda. This change in agenda often results in changes in organizational structures, priorities, support, and sometimes funding. Recognizing and accepting that this as an ever-present reality is critically important.

The greatest challenges in bringing about successful change and sustained performance in the public sector involves working around four unique obstacles. First, agency leaders are most likely not chosen because of their commitment to spearheading reform or because they have experience leading large-scale change efforts. Most commonly, they are appointed on the basis of their knowledge of policy, technical expertise for the specific agency's work, or their political connections.

Second, once appointed, the person has a limited amount of time to see a change effort through. Between the nomination or appointment process, which can occupy the first 9 months or more of a 4-year term, minus the last year when the person may have already identified or is considering his or her next move, the average tenure of political appointees is effectively 18 to 24 months. Given this scenario, top agency officials and other political appointees may choose to concentrate on policy reforms that can be enacted quickly, rather than on critically needed but time-intensive community initiatives or organizational change. In addition, some officials may choose not to support programs that were initiated in a prior administration.

Third, government rules and processes over such areas as procurement, personnel, and budgeting, which were originally implemented to prevent public-sector abuses, may have created workplace processes that are cumbersome and inflexible in comparison to those in the private sector. In addition, managers in the public sector are also faced with greater penalties for mistakes rather than rewards for exceptional performance or creative problem solving, which exacerbates these issues greatly. These types of management and business issues can significantly impact community health work by delaying the distribution of State, local, or grant funds to community groups or subcontractors, inhibiting the hiring of sufficient staff to implement the work of an initiative, or hindering the timely processing of contracts, such as those for media support or evaluation.

Finally, because of our democracy, everyone has a rightful stake in any public agency's activities. Constituencies may include not only the public but legislators at national, State and local levels, Office of Management and Budget, public interest watchdog groups as well as the media. With most of the work in the public-sector being conducted in a fishbowl, almost every initiative is bound to meet some type of challenge or resistance.

TRANSITIONING THROUGH POLITICAL CHANGES

While the ever-changing political landscape and the challenges of working in the public sector would be daunting for most professionals to manage, these are commonplace scenarios for community and public health professionals. In order to protect, advance, and sustain public health initiatives in the face of these types of changes, practitioners must develop competence to facilitate, negotiate, and collaborate through these changes and sometimes volatile political environments. To address some of the challenges and changes that a political landscape may present, the following strategies will be outlined briefly:

- Communicating and telling your story
- Talking about health in a new way—without political overtones
- The buffering effect of community partnerships
- Diagnosing internal and external political landscapes
- Learning to better understand the positions of partners
- Prioritizing stakeholder management

Strategy: Communicating and Telling Your Story

Communicating about the important work of public health, and specifically community-based efforts to government officials is essential. Drawing from powerful lessons learned from the Turning Point initiative, which was led and funded by the Robert Wood Johnson Foundation (RWJF) and the W.K. Kellogg Foundation, participants from State partnerships emphasized that telling your story can make a difference. To do that, ensure that government officials are aware of the progress and important successes of community-based initiatives along the way.¹⁰ State partners added that building relationships and educating stakeholders is not only a good idea, but should be considered an integral part of our work.¹¹

Evidence from highly successful tobacco control programs provide additional support for the importance of actively communicating about program activities and successes and ensuring that information is disseminated to a variety of audiences. State and local practitioners noted that to be successful and have an impact on audiences, communication efforts must be a part of a broader dissemination plan to ensure that information is distributed regularly. Evidence has shown that communication efforts are not only important for increasing awareness about the valuable work taking place, but also for generating support from policymakers and the public as it relates to future funding.

Strategy: Talking About Health in a New Way—Without Political Overtones

From a political perspective, practitioners may feel apprehensive about communicating to the public and especially government officials about public health and community-based efforts. As

outlined in a seminal document developed by RWJF, A New Way to Talk About the Social Determinants of Health, researchers found that if not messaged carefully, information about health and our strategies for impacting health can be highly politically charged. As the developers of the popular and effective message, "Health starts where we live, learn, work, and play," the report provides a wealth of information about communicating health messages more effectively and, most importantly, in a nonpartisan way (see Figure 5). The report also provides useful information about how best to present data and facts, especially as they relate to political context.

Figure 5: Six Ways to Talk About the Social Determinants of Health ¹³

Statements	Why these work
Health starts—long before illness—in our homes, schools, and jobs.	use informal values-driven language and relatable
 All Americans should have the opportunity to make the choices that allow them to live a long, healthy life, regardless of their income, education, or ethnic background. 	references that engage audiences, • focus on the solution rather than the problem,
Your neighborhood or job should not be hazardous to your health.	(some) implicitly acknowledge the notion of personal responsibility.
Your opportunity for health starts long before you need medical care.	. Toopensum,
5. Health begins where we live, learn, work, and play.	
6. The opportunity for health begins in our families, neighborhoods, schools, and jobs.	

Even if current elected or appointed officials are actively engaged and support community efforts, the situation can change drastically after an election. Given that elections happen over the course of many months, this type of change can be anticipated and to a certain extent planned for. When government officials change office, practitioners should actively work to connect, communicate, and start the process of educating and establishing a relationship with the new official and their staff immediately. While this is an ongoing process that requires a great deal of time and energy, it is time well spent.

Lessons From the Field: A community practitioner from a not-for-profit organization in an urban city noted that they were able to leverage funding to open doors, have discussions, and make progress in certain sectors, like the city planning department. However, the practitioner shared that after experiencing a change in leadership with city staff, they had to work at developing this rapport again, since the new person was not familiar with their community health initiative (and had, in fact, stopped a project that they had been working on for over 6 months). The manager added that relationship building is an ongoing process as leadership positions and partners change and requires a great deal of time.

Strategy: The "Buffering" Effect of Community Partnerships

While communicating and being visible to government officials is important, practitioners and community staff members in the field have shared that the most important aspect for sustaining community efforts when facing a new political administration is to ensure that you have a very active, broad, and engaged community partnership. With strong partnerships communitywide, the work can continue even if the political situation has changed. Although partners may have to modify their strategies or priorities based on the political situation, a broad-based partnership can provide a buffer from the political realities in cases where practitioners and their staff may need to play a less prominent role. Citing the upside of this scenario, a practitioner in the field shared that "this work reminds people how to be community citizens again."

Strategy: Diagnosing Internal and External Political Landscapes

Whether you work in the public or private sector, internal and external politics are a part of life. However, the issues for practitioners working in the public sector are understandably different. Given this reality, it is important for practitioners to become more politically savvy when engaging and working with internal and external partners. Drawing from a concept called "thinking politically," authors Heifetz, Grashow, and Linsky have outlined a process for diagnosing the political landscape. ¹⁴ While the process was developed for internal organizational politics, it can be applied to external environments and stakeholders as well. To engage in the process of thinking politically, the following information should be identified as it relates to key stakeholders:

- *Stake in the adaptive challenge at hand*—How will individuals be affected by this work?
- Desired outcomes—What would the stakeholder like to see happen related to the issue(s)?
- Level of engagement—How much does the stakeholder care about the issue(s)?
- *Degree of power and influence*—What impact can the stakeholder have on the issue(s)?

Identifying the following is equally important:

- Values—What are the commitments and beliefs guiding their behaviors and decision-making
 processes? To mobilize stakeholders and get them to engage with your change initiative, you
 have to identify their strongest values and think about how supporting your strategies would
 enable these stakeholders to serve those values.
- Loyalties—What obligations does the stakeholder have to people outside the immediate group? In leading adaptive change, broaden your focus beyond the usual partners. Take into account other partners that you know the stakeholder cares about. Consider how you might help each stakeholder and their partners in these efforts.

- Losses at risk—What does the stakeholder fear losing if things should change? One element of thinking politically involves identifying the potential loses that you are asking people to take and then helping them "survive" them.
- Hidden alliances—What shared interest(s) does the stakeholder have with other major stakeholder groups that could lead to an influential alliance? People may align behind shared interests, concerns, and values. By identifying their common causes, you may be able to mobilize them to engage in your change initiative.

Strategy: Learning to Better Understand the Positions of Partners

It is important to clarify that thinking politically is not acting politically. In fact, it is just the opposite. By following the processes outlined above, practitioners can become more aware of the lens through which stakeholders view the issues (perspective), identify any competing interests, and map out the information to help navigate these issues and guide strategies (i.e., diagnose the situation). Illustrated in Table 2 below is an outline that can be used (and expanded) as a worksheet to capture this information as it relates to critical stakeholders. How do you answer these questions? If you are not able to ask stakeholders directly (and in a safe, casual space—e.g., lunch discussion, over coffee) consider second-hand sources (while understanding that they may have their own filters of the information).

Table 2: Worksheet for Identifying Alliances

Your proposed	Your proposed objective/strategy:				
Stakeholder	Relationship to the Issue?	Preferred Outcome?	Core Values?	Loyalties?	Potential Losses?
(individual or group)					

Outlining the information above is a good first step for better understanding political points of both contention and commonality with key stakeholders. Taking this one step further, when meeting and working with stakeholders/partners directly, it is important to build relationships and trust by developing a keen understanding about their perspective on the issues. Following are a few practical but important strategies to consider when engaging and working with community partners directly¹⁵:

- Understand that in any situation, individuals and groups act out of self-interest.
- Be aware of and recognize self-interests and political sensitivities through direct observation and casual conversation.

- Test your understanding by trying out small suggestions regarding some of the change strategies that you are working to promote. Watch for reactions and listen intently. This will indicate where people are coming from and help you comprehend their views and selfinterests.
- Start to define issues that you think they would be willing to support and activities that they would like to do.
- Identify areas that you sense they oppose or by which they feel potentially threatened.
- Consider approaches to ease or ameliorate their concerns.
- Identify areas of commonality and be willing to trade off in those areas that you know they would not support (while balancing the need to move efforts forward).

Strategy: Prioritizing Stakeholder Management

Because practitioners and other lead staff members are juggling many different components, it is critically important to strategically prioritize the time that should be spent with stakeholders. While it may seem calculated to prioritize this information, from a capacity standpoint, it is the only way to manage the work and make the progress needed. After outlining who the stakeholders are and assessing their interests and position as noted above, the next step is to prioritize this group by using a power/interest grid (see Figure 6). The higher the power and/or the interest, the higher priority you should give to managing and communicating with this stakeholder. When prioritizing specific stakeholders, ask, "Does this person have the power or interest to further (or block) the objectives of the initiative?"

High Keep Satisfied Manage Closely

Low Monitor Keep Informed

Low High

INTEREST

Figure 6: Power/Interest Prioritization Grid

Use the Power/Interest grid to identify where a stakeholder falls and determine the amount of communication that would be appropriate on the basis of your needs and theirs.

• *High power and high interest*—Manage closely. These are the stakeholders that you need to engage continuously in your networking efforts. Try to stay current with them at all times.

- *High power and less interest*—Keep satisfied. Here you have to balance your efforts against an annoyance factor. Be persistent but not pushy and be aware of the cues these stakeholders send you regarding how much contact is too much.
- Low power and high interest—Keep informed. These stakeholders can be counted on for moral support and motivation when things are not going well. They can also be the ones who put doubt in your mind. Keep them in the loop, but do not focus your energies on them.
- Low power and less interest—Monitor. Keep these people on your radar. Their power and interest position may change.

TOPIC 2: ORGANIZATIONAL CHANGES

There are many reasons why planned organizational changes may be necessary. In most organizations, change is typically used to improve organizational performance in some capacity and may involve targeting one or more of four categories: structural, cost-cutting, process, or cultural change.^{7, 17}

- *Structural change* involves reconfiguring areas to achieve greater overall performance (e.g., restructuring organizations or divisions to facilitate increased collaboration and communication across program areas).
- Cost-cutting or -saving factors may include identifying and eliminating nonessential
 activities or more importantly, identifying areas where resources may be leveraged (e.g.,
 integrating chronic disease program areas to share resources across programs focused on the
 same target areas and settings).
- *Process change* focuses on improving or making functions more effective and reliable (e.g., updating contract processes to expedite the distribution of funds).
- *Cultural change* focuses on the "human" side of the organization (e.g., shifting program areas from a direct services/program mentality to an environmental- and systems-level prevention focus).

Outside of these types of situations, there are instances where organizational change in public sector or not-for-profit environments may be driven by other factors. For example, as political administrations change or a new agency or organization head is appointed, the strategic direction(s) of a health department, organization, or foundation may also change. Often these changes will impact the organizational structure as well. Additionally, as Federal focus areas shift or new funding streams are developed, organizational restructuring may be necessary. All of these change scenarios present new opportunities, but also potential challenges for community and public health practitioners.

One additional challenging aspect of changing organizational structures is determining how these changes will impact the structure needed to effectively deliver community health activities. As noted in the seminal article on collective impact, 18 creating and managing effective multisector collaboration requires a dedicated organization and staff with very specific skills to serve as the backbone of these types of efforts. The authors add that expecting collaboration of this level to occur without a supportive infrastructure is one of the most frequent reasons why these types of efforts fail. Given this information and the potential shifts in organizational structure around these types of efforts, practitioners and organizations are challenged to ensure that the necessary

structure and staff are in place to manage public health initiatives while integrating well with other program areas.

TRANSITIONING THROUGH ORGANIZATIONAL CHANGES

In the private sector, information about organizational change abounds. According to researchers in the field, there are over one million articles related to organizational change. However, information and research about planning and leading organizational change in public organizations are few and far between and much less established. ¹⁹ Although community and public health practitioners are trained to create change in external community environments, they may feel much less prepared for or even powerless to tackle organizational changes. And, while practitioners are familiar with using evidenced-based strategies for community and public health change initiatives, they may not be aware of the resources available to them in other disciplines in relation to change management. The good news is that many of the organizational change models and strategies from the private sector have applicability to public and not-for-profit sector environments as well, and can be adapted for this work.

To address some of the challenges that practitioners encounter related to organizational change, the following strategies will be outlined briefly:

- Communicating with executive administrators during change efforts
- Using and adapting change models to guide organizational change
- Transitioning from planning to implementing change
- Using change management competencies

Strategy: Communicating With Executive Administrators During Change Efforts

Just as it is important for practitioners to tell their story to government officials, it is equally important to communicate often with supervisors, executive-level leadership staff, and possibly board members about the successes and challenges of the program area. Practitioners may underestimate what executive-level administrators or board members need to know and what they do know. While this may seem basic, it is often overlooked. Keeping these important stakeholders in the loop as much as possible is an important factor for ensuring that the program area has the support, resources, and structure necessary to accomplish the goals of the initiative. For example, as new funding announcements for public health initiatives have been released in the last few years, some opportunities have brought with them specific organizational structure and support needs. Communicating with upper management as clearly as possible about the changes that these opportunities present, and identifying organizational solutions for managing these changes if the program area should be funded, is essential for success.

Lessons From the Field: After assessing the current landscape of chronic disease prevention efforts and community-level environmental and systems change initiatives, a State health department completely revamped its organizational structure by bringing core program areas under the umbrella of a new commission. This reorganization facilitated improved integration across chronic disease prevention areas, expanded the State's ability to provide training and technical assistance to local communities, and increased their capacity to be more responsive and competitive to grant opportunities.

Strategy: Using and Adapting Change Models to Guide Organizational Change

Once an agency, organization, or program area has determined that some type of organizational change is needed or desired, there are several well-established models to guide the planning and implementation of the change effort. Outlined in Table 3 are four examples of organizational change models. Despite some differences in these models and frameworks, there are many remarkable similarities. In addition, it is striking that many of the core steps and processes from these change models closely reflect the types of activities and strategies that practitioners use for complex community change efforts. Following are examples:

- Mobilizing
- Empowering others
- Forming and building external partnerships
- Developing a shared vision
- Involving leadership
- Communicating the vision
- Institutionalizing (sustaining) change

Table 3: Organizational Change Models

Lewin's Change Management Model ²⁰	Kotter's 8-Step Change Model ¹⁰	Seven Steps to Change (Harvard Business Review) ⁷	Organizational Change in the Public Sector ²¹ (Factors)
 Unfreeze: Determine what needs to change Ensure strong upper-level support Create need for change Manage and understand the doubts and concerns Change: Communicate often Dispel rumors Empower action Involve people in the process Refreeze: "Anchor" the changes into the culture Develop ways to sustain the change Provide support and training Celebrate success 	 Establish a sense of urgency Form a powerful guiding coalition Develop a vision Communicate the vision Empower others to act on the vision Plan for and create short-term wins Consolidate improvements and build on them Institutionalize new approaches 	 Mobilize energy and commitment through joint identification of problems and their solutions Develop a shared vision of how to organize and manage for (competitiveness) effectiveness and sustainability Identify the leadership Focus on results, not on activities Start change at the periphery, then let it spread to other units without pushing from the top Institutionalize success through formal policies, systems, and structures Monitor and adjust strategies in response to problems in the change process 	 Ensure the need Provide a plan Build internal support for change and overcome resistance Ensure top management support and commitment Build external support Provide resources Institutionalize change Pursue comprehensive change

These models of change draw from many disciplines, such as psychology, behavioral science, and systems thinking. The underlying principle is that change does not happen in isolation—it impacts whole organizations, systems, and communities around it, and all the people touched by it. In order to either drive change or manage change, it is important to understand the wider impacts of the changes.

As illustrated across these models, the essential components of change management include the following²²:

- *Support*—Ensuring there is active support for the change at a senior executive level within an organization.
- Buy-in—Gaining buy-in for the changes from those involved and affected, directly or indirectly.
- *Involvement*—Involving the right people in the design and implementation of changes to ensure the right changes are made.
- *Impact*—Assessing and addressing how the changes will affect people.
- *Communication*—Telling everyone affected about the changes and promoting successes.
- *Readiness*—Getting people ready to adapt to change by ensuring they have the right information, training, and help.

It is important to note that while these models are well established, many organizations struggle to effectively implement change efforts (due to short-cutting steps or neglecting processes), and often fall short of achieving the desired outcome. Change management expert Dr. Kotter notes that the more successful efforts adhere closely to the steps and processes outlined in these models, adding that even successful change efforts are messy and full of surprises. Zeroing in and providing more detail regarding Dr. Kotter's 8-step change model, Table 4 below outlines key actions that need to happen per step, as well as common pitfalls to avoid. ²³ Dr. Kotter adds that while working through the steps of the model will allow you to create a new system, the critical factor for being able to implement the changes effectively is great leadership.

Table 4: Kotter's 8-Step Change Model

	Steps	Actions Needed	Pitfalls to Avoid
1.	Establish a sense of urgency	 Examine internal and external program realities for potential crises and untapped opportunities Convince at least 75% of key staff that the status quo is more dangerous than the unknown 	 Underestimating the difficulty of driving staff members from their routines and comfort zones Becoming paralyzed by risks or complexity
2.	Form a powerful guiding coalition	 Assemble a group with shared commitment and enough power to lead the change Encourage them to work as a team outside the normal hierarchy 	 Having no prior experience in teamwork at the top Relegating team leadership to human resources or strategic-planning executive rather than a senior line manager/practitioner

Table 4: Kotter's 8-Step Change Model (continued)

	Steps	Actions Needed	Pitfalls to Avoid
3.	Create a vision	 Create a vision to direct the change effort Develop strategies for realizing that vision 	Presenting a vision that is too complicated or too vague to be communicated in 5 minutes
4.	Communicate the vision	 Use every vehicle possible to communicate the new vision and strategies for achieving it Teach new behaviors by the example of the guiding coalition 	Under-communicating the vision Behaving in ways that are adverse to the vision
5.	Empower others to act on the vision	 Remove or alter systems or structures undermining the vision Encourage risk taking and nontraditional ideas, activities, and actions 	Failing to remove (or reassign) powerful individuals who resist the change effort
6.	Plan for and create short-term wins	 Define and engineer visible performance improvements Recognize and reward employees contributing to improvements 	 Leaving short-term successes up to chance Failing to score successes early enough (12–24 months into the change effort)
7.	Consolidate improvements and produce more change	 Use increased credibility from early wins to change systems, structures, and policies undermining the mission Hire, promote, and develop employees who can implement the vision Reinvigorate the change process with new projects and change agents 	Declaring victory too soon—with the first performance improvement Allowing resistors to convince "troops" that the war has been won
8.	Institutionalize new approaches	 Articulate connections between new behaviors and corporate success Create leadership development and succession plans consistent with the new approach 	 Not creating new social norms and shared values consistent with changes Promoting people into leadership positions who do not personify the new approach

Strategy: Transitioning From Planning to Implementing Change

When transitioning from planning to implementing a new organizational structure (or other type of change), the need for communication and information increases exponentially. Change experts recommend not relying on a "big bang" announcement to gain buy-in or provide information

about a future change. Communicating effectively and often about changes that will be implemented can help set the stage for successful adoption.

Outlined below are key strategies for effectively communicating when implementing change²⁴:

- Specify the nature of the change—Slogans, themes, and phrases do not define what the change is expected to achieve. Communicate specific information about how the change is going to improve organizational performance or other aspects.
- *Explain why*—Staff and team members are often left in the dark about the reasons behind the change. While you may be immersed in the effort, most staff members are out of the loop of information. In addition to providing this background, share with your team the various options available and why some are better than others.
- Explain the scope of the change, even if it is bad news—Some change may affect only a few individuals within the organization, while others may affect everyone. Because fear and speculation can paralyze groups, it is best to present the facts without sugarcoating them. If people will lose their jobs, be up front about it. Also take time to explain the things that will not change. This will help anchor/stabilize staff members.
- Develop a graphic representation of the change so that people can understand it better and hold it in their heads—Whether it is a flowchart or a graphic image of what the final change will look like, providing a visual can help provide clarity. Be sure to keep it clear, simple, and memorable.

Lessons From the Field: As a community coalition prepared to shift from one grant initiative to another that had a slightly different focus, practitioners developed a one-page diagram illustrating how the new project was going to continue off the work of the last initiative. This illustration helped the partners understand how the new work connected to earlier efforts and, most importantly, how it tied into the overall vision.

- Explain the criteria for success and how it will be measured—Define success early and devise methods for measuring progress, and then communicate that progress often.
- Repeat, repeat, and repeat the purpose of change and actions planned—If the initial announcement does not generate questions, do not assume that the staff or partners accept the need for change. Make sure that you follow up after the announcement meeting, and then plan regular communication from that point forward.
- Use a diverse set of communication styles—Successful change programs build communication into their plans using dedicated newsletters, events, e-mails, and

- presentations to keep people informed, involved, and engaged. These communications should be honest about successes and failures. If people lose trust in what they are hearing, they will tune you out.
- *Make communications a two-way proposition*—If you are a change leader, spend as much time listening as sharing. Your attention to this point will help keep others involved and motivated. Leaders need feedback, and the hardworking implementers need opportunities to share their learning and their concerns with leaders who listen.

Strategy: Using Change Management Competencies

While the technical aspects of organizational change may be easier for some to manage, it is important that practitioners recognize the social and human factors that often surface in times of change (which are more adaptive in nature). Outlined below are several key change management competencies that practitioners can use to effectively manage and transition through the human factors of organizational change.³

- Become a change agent and embrace change—Practitioners are natural change agents. Wearing dual hats, they function as important change agents in the community and manage and lead change internally in their organizations. The best way to lead and transition people through change is to prepare them for it ahead of time as much as possible, provide support, and most especially, model strong adaptive behaviors. Modeling positive change behaviors and attitudes will help to create a culture that is change resilient. In addition, practitioners can train staff to become more change-ready by periodically challenging them with small doses of change opportunities. Following are examples:
 - Changing work processes whenever there are real opportunities for improvement
 - Giving staff members periodic reassignments that allow them to learn new skills and deal with new situations
 - Using "stretch" goals to encourage greater flexibility and effort
- Enlist support from key people—Work to engage the support of staff members or partners whom others respect, informal leaders whom others seek out for direction and support, and those with key technical skills related to the change.
- Address resistance to change—Given that change is difficult and forces people out of their routines, it can generate strong emotions from staff and partners. It is important to think through how change might impact each of your staff members and how each may respond. Are there some who will clearly lose (or gain) something because of this change? If so, it is important to address the issue(s) directly.

- Provide meaningful "anchors"—Anchors are things that provide a sense of routine, familiarity, and continuity in the environment. No matter how prepared people are for change, they still need anchors. Social linkages and strong core values can help provide a steady foundation during times of change.
- Recruit staff with change management in mind—Whether in the public or private sector, successful organizations are built with talented, high-performing professionals. Practitioners need to become more savvy in their staff recruitment strategies and actively pursue change-hardy professionals who are innovative and creative.
- Use change management strategies to lead the organization to an innovative and successful future—Tap into the vast change management literature to determine the most effective methods for leading change effectively and incorporate strategies that will work best based on your situation.

TOPIC 3: FUNDING CHANGES

Developing, leading, and implementing complex community health collaboratives requires a lead organization, a dedicated core staff, and significant financial investment. Although funding is such a significant factor, financial resources for most State and local initiatives vary greatly, with the large majority of funds coming from grant funding sources. Not-for-profit organizations are in a similar situation, and possibly more so because they may not have the ability to leverage resources across program areas. For States, the large majority of funding for these types of efforts may be from Federal sources. For local health departments, the available funding for tackling the complex and significant issues of obesity and chronic disease prevention is often negligible. While not-for-profit organizations are able to apply for a greater range of funding sources, the competition is intense.

Because of the extremely competitive nature of most large-scale Federal funding opportunities, which are open to non-public health organizations in addition to State and local health departments, even the most successful programs are at risk. For practitioners, determining whether to dedicate the time, staff, and effort that is necessary for developing a competitive grant proposal while managing current efforts is always a gamble. The stark reality for many practitioners is that the demand for their programs, services, time, and talent almost always exceeds their capacity.²⁶

Practitioners may be impacted by several different funding change scenarios. First, there are highly successful communities and organizations that have been able to establish and maintain the vision, leadership, and capacity to be awarded successive large-scale community-level grants. For these communities, the primary change may include shifts in the focus areas of each funding cycle and possibly staff reorganization. While this is certainly a more desirable challenge to have, it does require nimbleness and awareness of issues related to partner management. For example, while a partner might be highly engaged and a subcontractor for one funding cycle, they may not be directly included in another grant cycle because of change in focus area or funding structure. In these cases, leveraging resources across grant cycles becomes a key factor, in addition to being able to clearly articulate and tie in the overall vision across grant cycles.

In another scenario, there are communities and program areas that are awarded a Federal or foundation grant for a particular initiative through one grant cycle, but are not funded for the next initiative. In these instances, the program or organization not only has to figure out how to keep the efforts going, but also how to keep (now highly trained) staff onboard. Losing a substantial funding source can jeopardize the hard-won work of an initiative and the partners involved, consequently threatening sustainability.

In the final scenario, a community or program area may be fortunate to receive a grant award for the first time. While this is an extremely exciting opportunity and a time for all of the partners to celebrate, the situation may quickly become sobering if the awardee does not have sufficient capacity to manage the intense work that occurs in the early implementation stages of the grant period. Each of these scenarios presents very different funding issues, but all require important short- and long-term transition strategies to survive.

Lessons From the Field: A practitioner from a local health department involved with several Federal community health initiatives shared that it is important to have five or six projects already well thought-out and in "your back pocket" in order to be prepared and responsive to competitive grant opportunities.

TRANSITIONING THROUGH FUNDING CHANGES

Having financial resources or funding is an essential factor for being able to create and sustain successful community and public health initiatives. While funding stability is such a critically important factor, it may be one of the most neglected or underemphasized components of this work. Instead of dedicating the time, focus, and effort necessary to plan for and be more proactive about this vital aspect, many organizations leave this to chance and often rely on being reactive to funding announcements. Given the capacity issues that many organizations face, it is understandable that they may not elevate the importance of this issue until the situation becomes serious. To assist practitioners in taking a more proactive stance regarding funding, the following strategies will be outlined briefly:

- Understanding and leveraging resources
- Incorporating elements of sustainability
- Creating a resource development/sustainability plan

Strategy: Understanding and Leveraging Resources

Drawing from lessons learned from the Turning Point initiative, an RWJF and Kellogg Foundation project, grant participants described that they were able to successfully leverage other funds in their States because of comprehensive planning and extensive partnership activities.²⁷ As described by the authors, the concept of leverage involves multiplying the benefits of a specific grant-funded project by using it to obtain additional resources. Grant participants stated that because of this work, they were able to provide a convincing rationale ("make the case") to State administrators, policymakers, or private fund providers for what their State specifically needed. Participants reported that the planning and partnership activities provided the preparation, background data, legitimacy, and broad base of support to have a well-developed proposal in hand when strategic opportunities arose or were created. While the

planning was important, participants noted that the breadth and credibility of their established partnerships provided the crucial tipping point for getting decision makers to fund, maintain, and expand infrastructure improvements.

Lessons From the Field: A community practitioner shared that by using inkind hours and grant dollars from one community initiative, their school districts applied for and earned \$1.3 million in additional funds. This has given them a great deal of confidence to pursue other funds.

For some, the concept of leveraging resources is difficult to comprehend. To provide important guidance about this concept, the Annie E. Cassie Foundation (through Organizational Research Services) has developed excellent tools that can be used to identify and measure these types of outcomes. ^{28, 29} The authors define leverage outcomes as changes in investments (monetary or inkind contributions) by other public or private funders, institutions, or organizations. Leveraged resources may include the following:

- Human resources
- Financial resources
- Program resources
- Information resources
- Partnerships among community-based organizations
- Funding partnerships
- Public-private partnerships

The following framework in Table 5 provides potential leverage outcomes to consider for supporting community and public health efforts.

Table 5: Examples of Types of Leverage and Potential Outcomes 28

Outcome Areas	Sample Outcome Statements
Changes in public funds	 New public funds allocated toward community and public health priorities Public funds redistributed toward community and public health priorities New funding methods (pooled, matched, blended) increase monetary resources to support community and public health priorities Public funding practices (request for proposal [RFP] process, selection criteria) change to increase availability of funds for community and public health priorities Public agencies provide detailed or loaned staff for work on a particular program or strategy

Table 5: Examples of Types of Leverage and Potential Outcomes (cont.) 28

Outcome Areas	Sample Outcome Statements
Changes in philanthropy	 Increased funding available for community and public health priorities New funding methods (pooled, matched, blended) increase monetary resources to support community and public health priorities Foundation funding practices (RFP process, selection criteria) change to increase availability of funds for community and public health priorities Foundations make new types of funding available Foundations previously uninvolved in community begin to provide funding for community and public health programs, agencies, and initiatives Funders pool resources dedicated to a priority area
Changes in resources available to the community	Community and public health staff and partners have access to the following: New physical resources (meeting rooms, computers) New service resources (copying, printing, delivery) New transportation resources (buses, taxis)
Changes in private investment	Investments in redevelopment increase Private investments in community and public health efforts increase
Changes in partnerships	Partners increase in-kind donations that support priority goals and strategies of community and public health initiatives

Strategy: Incorporating Elements of Sustainability

As more community and public health initiatives become vulnerable due to reduced government funding, it is important to identify essential factors that are most important for sustaining programs over the long term. Outlined in Table 6 are five key elements of program sustainability identified by successful State tobacco control programs. While all five of the components are important, the funding component acts as the "fuel" for the entire effort and significantly influences a program's ability to provide adequate long-term services and other activities. ¹²

Table 6: Five Components of State Tobacco Control Program Sustainability 12

State Political and Financial Environment	Community Awareness and Capacity	Program Structure and Administration	Program Funding	Program Surveillance and Evaluation
 Public support Governor Legislature Political champions Organized opposition State financial climate 	 Program visibility and acceptance Community participation Community assessment Public relations and marketing Grassroots organization 	 Fiscal management Partner involvement Strategic planning Support and expertise 	 Funding stability Planning Fiscal independence Capacity 	PlanningImplementationUtilization

On the basis of this sustainability framework, in addition to prior research, the following major lessons from these tobacco prevention and control efforts were identified as being important for maintaining funding:

- Strong and experienced leadership—Because of the familiarity with the policy environment and key people involved in the efforts, State leaders had the ability to "make things happen and get things done."
- Broad and deep organizational and community ties—State staff were not viewed as "faceless" government bureaucrats (i.e., not visible and involved), but as integral parts of community health improvement activities.
- Coordination of efforts—Groups with different missions were able to work in concert for specific purposes.
- Strategic use of surveillance and evaluation data—State or local data provided the evidence
 to support the need for maintaining tobacco prevention and control programs and
 demonstrating the value and effectiveness of the programs.
- Active dissemination of information about program successes—As part of a broader communication plan, information was disseminated to a broad audience regularly.
- *Policymaker and community leader champions*—Programs are enhanced when "champions" provide support. The more powerful the champions, the greater the chances of success.

Strategy: Creating a Resource Development/Sustainability Plan

An essential component of being able to ensure the sustainability of community and public health efforts is to invest the time to develop, implement, and regularly assess a financial plan for the organization or program area. Moving from a reactive to a more business-like proactive model of financial planning is a critical first step. While this process does not guarantee financial stability, it will establish a process for practitioners, programs, and organizations to think more systematically about meeting their short-term and long-term resource needs. There are many excellent tools to assist with the development of a resource, fundraising, or sustainability plan. Two examples which will be referenced in the following information include "Mosaica: The Center for Nonprofit Development and Pluralism³⁰" and "The Community Toolbox" developed by the Work Group for Community Health and Development of the University of Kansas and, specifically, the section titled Developing a Plan for Financial Sustainability.³¹ These excellent resources are two of many guides that can be used and adapted by communities and organizations to establish a proactive course of resource development.

Outside of developing financial stability and independence from one source of funding, a resource development plan has many other benefits.^{30, 31} Establishing a financial plan allows the program or organization to do the following:

- Focus on delivering the work of the action plan and working with partners.
- Ensure greater stability of staff and, therefore, increased ability to hire and retain quality professionals.
- Eliminate abrupt changes and endings from one source and allow efforts and staff to continue to make progress.
- Elevate the priority of fundraising and demystify the process.
- Identify and tap into a range of funding sources and reduce dependency on any single funding source.
- Organize, focus, and target resource development efforts.
- Gain clarity about capacity.

Before engaging in this process, it is very important that staff members think through how much is needed in terms of financial stability, clarify the priorities of the initiative, and identify how to grow and adapt in the future to sustain these changes over time. Following are some of the major steps to consider when embarking on developing a financial stability plan:

- 1. Decide who will develop the plan.
- 2. Let all stakeholders know what you are planning.
- 3. Be clear about your mission and program priorities before engaging in the process. If you have not identified these aspects, start the process with strategic planning.
- 4. Conduct an internal audit.
- 5. Determine your resource needs and priorities and match objectives to your current capacity.
- 6. Consider the available possibilities and fundraising environment.
- 7. Identify objectives and develop a work plan with timelines and measurements.
- 8. Make resource development a shared responsibility and valued process for all staff.

Although this process may seem like a great deal of work, the time spent could result in a significant return on investment. Additionally, once an initial plan is developed, it can be used as baseline information and updated as the objectives of the work plan are accomplished and priorities shift. In addition to identifying the resources needed, it is also important that practitioners keep in mind the training needs of the staff and program. For example, to support the important work of the resource plan, practitioners should consider providing ongoing grant writing training to staff and key partners.

Lessons From the Field: Practitioners from several communities shared that they were in the process of developing fund development strategies or sustainability plans. They stated that while the goal was to diversify funding sources, the plan would build from current strategies that they had in place, in addition to tying in the involvement of their community partners.

By developing a resource development plan, the overall funding and finance of the program areas should become more secure. This can lead to the following³⁰:

- An increased focus on the actual work of the initiative—Moving from day-to-day survival can allow you to focus on the mission and do more of what you set out to do.
- *Becoming more competitive in your field*—Stable funding allows you to hire more and better staff, which, again, allows you to do more to achieve your mission.
- *Easier transitions*—Having a financial plan can assist your organization in successfully transitioning between funding cycles or bridging the gap when there is a loss in a funding source.

APPENDIX: ASSESSING YOUR CAPACITY TO MANAGE CHANGE AND LEAD THROUGH TRANSITIONS

Use the following assessment tool, developed by management and leadership expert, Dr. Riordan, to identify your level of competency on key dimensions as it relates to change, management, and leadership. Competencies include any knowledge or skill that an individual or organization possesses that leads to or causes outstanding performance in an area. Assessing your level of knowledge or skill for each competency indicator described below will allow you to determine your proficiency in each area and identify aspects where you may need training.

-	d Openness to Change—The ability to respond to new demands and challenges a constructive, positive outlook about change.
☐ Whe rathe	ew challenges excite you, and are you willing to tackle them? In presented with a change in the organizations, do you view it as an opportunity or than a threat? Ou challenge the status quo within the organization?
Self-Awareness	—The ability to recognize when you do not possess the skills/competencies rate the transitions and that you need to change competencies, behavior, and/or
•	ou recognize when you need to gain some new capabilities or change behaviors or attitude?
☐ Are	you willing to learn or seek help when needed?
☐ Are	you willing to admit that you have to change to succeed?
□ Do y	ou proactively work on expanding your capabilities/competencies?
•	ou commonly ask yourself, "If I were to start this job all over again, what would d to do differently?"
-	turity—The felt responsibility to make the changes in competencies, behaviors, ded to support the direction of the organization and to be successful in the role.
☐ Do y	you feel that it is important to improve as a leader to help the organization eed?
	ou look for ways in which you can improve to help the organization achieve its
e	ou recognize that a change in attitude can result in a change in behavior?
•	ou seek to understand why changes are needed?

Leadership Resilience—The ability to rebound from setbacks and/or changes. □ When things do not go well, do you work to make them better? □ When there is a setback, do you reflect on what happened and look for ways improve? Strategic Thinking—Developing a deeper understanding of the work so that you understand how community-based efforts are changing and why and how you might need to change as a leader. □ Do you proactively look for ways to improve? □ Do you periodically question your own assumptions, ideas, and thinking? □ Are you able to define the issues or problems clearly to determine appropriate actions? □ Do you priodically conduct a reality test on yourself to see if you are on track? "Business" Acumen (Modified)—Developing a deeper understanding of the business of community and public health work, so that you understand what in the community needs to change and how and why and how you might need to change as a leader. □ Do you proactively seek to know more about evidenced-based practices and practice based evidence so that you can help move the community in the direction it needs to go? □ Do you pay attention to successes, lessons learned, and strategic shifts that are taking place in other communities and nationally? □ Do you apply these developments to the work you are leading, as well as how you might need to change as a leader?		Are you an active steward of the organization and its goals?	
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REFERENCES

- ¹ Bridges, W., & Bridges, S. (2009). *Managing Transitions*. Philadelphia, PA: DeCapo Press.
- Stevens, T. (2008, July). 7 Actions to Manage Transitions. Retrieved August 10, 2012, from http://www.thinkleadershipideas.com/index_files/archive-2008.php
- ³ Luecke, R. (2003). Managing Change and Transition: 7 Practical strategies to help you lead during turbulent times. Boston, MA: Harvard Business School Press.
- ⁴ Riordan, C. (2008, May-June). *Navigating through leadership Transitions: Making it past the twists and turns.* Fort Worth, TX: Texas Christian University.
- ⁵ Baker, E., & Orton, S. (2010). The management moment—Practicing management and leadership: Vision, strategy, operations and tactics. *Journal of Public Health Management and Practice*, 16(5), 470–471.
- ⁶ Kotter, J. (1996). Leading Change. Boston, MA: Harvard Business School Press.
- Rowitz, L. (2010). Management and Leadership. Journal of Public Health Management and Practice, 16(2), 174–176.
- Ostroff, F. (2006, May). Change management in government. Retrieved August 10, 2012, from http://hbr.org/product/change-management-in-government/an/R0605J-PDF-ENG
- Wright, K., Rowitz, L., Merkle, A., Reid, W. M., Robingson, G., Herzog, B., et al. (2000). Competency development in public health leadership. *American Journal of Public Health*, 90, 1202–1207.
- Hann, N. (2002). All policy is relationships. Retrieved September 4, 2012, from http://www.turningpointprogram.org/Pages/hann_legislative_visit.html
- ¹¹ Hassmiller, S. (2002). Turning point: The Robert Wood Johnson Foundation's effort to revitalize public health at the State level. *Journal of Public Health Management and Practice*, *8*(1), 1–5.
- ¹² Nelson, D., Reynolds, J. Luke, D., Mueller, N., Eischen, M., Jorda, J, et al. (2007). Successfully maintaining program funding during trying times: Lessons from tobacco control programs in five States. *Journal of Public Health Management and Practice*, 13(6).
- ¹³ Robert Wood Johnson Foundation. (2010). A new way to talk about the social determinants of health. Retrieved July 30, 2012 from http://www.rwjf.org/en/research-publications/find-rwjf-research/2010/01/a-new-way-to-talk-about-the-social-determinants-of-health.html.
- ¹⁴ Heifetz, R., Grashow, A. & Linsky, M. (2009). Diagnose the political landscape—Understanding political relationships in the organization will help you lead adaptive change. In *The practice of adaptive leadership: Tools and tactics for changing your organization and the world.* Boston, MA: Harvard Business Press.
- ¹⁵ Lientz, B. & Rea, K. (2004). *Breakthrough IT change management: How to get enduring change results*. Burlington, MA: Elsevier Butterworth-Heinemann.
- ¹⁶ Mind Tools, Ltd. (2009–2011). Stakeholder management. Retrieved September 15, 2012, from http://www.mindtools.com/community/Bite-SizedTraining/StakeholderManagement.php.
- ¹⁷ Thompson, J. (2010). Understanding and managing organizational change: Implications for public health management. Journal of Public Health Management and Practice, 16(2), 167–173.
- ¹⁸ Kania, J., & Kramer, M. (2011). Collective Impact. Stanford Social Innovation Review, Winter, 36–41.
- ¹⁹ Fernandez, S. & Rainey, H. (2006, March/April). Understanding successful organizational change in the public sector. Theory to Practice. *Public Administration Review*, 168–176.
- ²⁰ Lewin, K. (2009–2011). Lewin's change management model. London: Mind Tools, Ltd. Retrieved September 15, 2012, from http://www.mindtools.com/community/pages/article/newPPM 94.php.
- ²¹ Fernandez, S. & Rainey, H. (2006, March/April). Managing successful organizational change in the public sector. Theory to practice. *Public Administration Review*, 168–176.
- ²² Mind Tools, Ltd. (2009–2011) *Change management: Making organization change happen effectively.* Retrieved September 30, 2012 from http://www.mindtools.com/community/pages/article/newPPM_87.php.
- ²³ Kotter, J. (2011). Leading change: Why transformation efforts fail. In On change management. Boston, MA: Harvard Business Review Press.
- ²⁴ Saunders, R. (1999, August). Communicating change: A dozen tips from the experts. Harvard Management Communication Letter.

- ²⁷ Bekemeier, B., Riley, C., Padgett, S., & Berkowitz, B. (2007). Making the case: Leveraging resources toward public health systems improvement in turning point States. *Journal of Public Health Management and Practice, 13*(6), 649–654.
- ²⁸ Organizational Research Services prepared for the Annie E. Casey Foundation. (2004). A practical guide to documenting influence and leverage in Making Connections communities. Retrieved June 11, 2012, from http://www.organizationalresearch.com/publicationsandresources/aecf_influence_leverage_manual.pdf.
- ²⁹ Organizational Research Services. (2004). Theory of change: A practical tool for action, results and learning. Retrieved June 11, 2012, from http://www.aecf.org/upload/PublicationFiles/CC2977K440.pdf
- ³⁰ Mosaica: The Center for Nonprofit Development and Pluralism. Resource Development Planning. http://www.mosaica.org/Resources.aspx
- ³¹ University of Kanas. (2012). The community toolbox. Lawrence, KS: Retrieved September 10,2012 from http://ctb.ku.edu/en/default.aspx
- 32 The North Carolina Public Health Academy (2010). Public health leadership and management self-assessment. Retrieved July 10, 2012, from www.sphtc.org/assessments/leaddrshp-mgmt-self-assmt.pdf.

²⁵ Butterfoss, F. (2007). Coalitions and partnerships in community health. San Francisco, CA: Jossey-Bass.

²⁶ Duyck, G. (2008). Fundraising 101: Why seek private funding? The management moment. *Journal of Public Health Management and Practice*, 14(2), 199–201.



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