

# Learning Agenda for Systems Change:

A Toolkit for Public Health,  
Partners, and Communities



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The *Learning Agenda for Systems Change: A Toolkit for Public Health, Partners, and Communities* is referred to throughout this document as the Learning Agenda Toolkit or the Toolkit. This 2025 Toolkit is the 2.0 version of the Learning Agenda Toolkit originally released in 2020. We welcome your feedback, reactions, and recommendations for change. Additionally, we would appreciate any stories of implementation and results of those implementations (what worked/what didn't work). To get in touch, please visit [www.publichealthlearningagenda.org](http://www.publichealthlearningagenda.org) and complete the contact form.

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## Section 1: Background and Overview

### Welcome to the Public Health Learning Agenda for Systems Change (LASC) Toolkit 2.0!

The LASC Toolkit 2.0 is an action-oriented, evidence-informed, field-tested process for organizations (as well as their partners and communities) to use transformative learning as a driver for equity-focused systems change. The Toolkit 2.0 is designed to support public health professionals as they address complex challenges and profound health disparities caused by longstanding injustices perpetuated by structures of decision-making, resource distribution, and other policies and practices. Traditional workforce development approaches are thoughtful and important; but they are often insufficient to adequately support the workforce in addressing these challenges. Transformative learning is required to shift thought, action, and impact in collaborative, community-centered, sustainable ways.

The LASC Toolkit 2.0 features a five-phase framework and associated resources to help teams and their partners - regardless of current readiness level - develop learning strategies that fully address complex problems. The Toolkit 2.0 provides the rationale, process, and tools to help teams create their own Learning Agenda for Systems Change. There are three elements to the LASC Toolkit 2.0:

- **Section 1** includes a description of the foundational concepts behind the LASC, an overview of the LASC Framework, and tips on how to use the LASC process
- **Section 2** is a practical guide for completing the five phases of developing a Learning Agenda
- **Section 3** includes a worksheet (template + completed sample), resources, and references

The LASC Toolkit 2.0 is available to download at [www.publichealthlearningagenda.org](http://www.publichealthlearningagenda.org) (you can find links to other helpful resources there, as well).

The audience for the LASC Toolkit 2.0 is workforce development professionals, community health and strategic planners, and other public health leaders and their partners. Whether you're just learning about systems change or are an experienced systems change leader, the LASC Toolkit 2.0 provides a process, tools, and resources to help guide your thinking.

To begin your LASC journey, we encourage you to review Section 1. Here, you'll learn about the rationale and framework for this new approach to workforce development.

## Background: Why do we need the Learning Agenda for Systems Change?

### Persistent, complex public health challenges are rooted in inequity

For years, public health teams and their partners have been trying to address persistent health disparities – seeking better outcomes for chronic conditions like heart disease and diabetes, and effective solutions for crises around mental health, substance use disorders, and violence. Lasting effects from the COVID-19 pandemic, climate events, and ongoing economic uncertainty have increased the urgency and impact of public health challenges.

As public health professionals, we know that many of these issues are complex, caused by unjust, unequal policies and practices that create inequitable systems. We know there is no single, simple solution to change the health of a community, and that no organization can do it alone. We need to change the systems in which our communities exist – to shift roles, structures, relationships and perceptions. Addressing inequity necessitates a different and collective approach to making sustainable change.

### Thinking beyond individual approaches toward systems thinking is needed in workforce development

Many public health approaches to inequities and population health challenges remain focused on defining the challenge in ways that require individual behavior change and do not acknowledge the systemic inequities that make individual behavior change difficult. Instead, individual, organizational, community, and systems-level collective approaches to defining the challenge can generate more sustainable, strength-based approaches.<sup>i,ii,iii,iv</sup> The implications of the individual behavior change approach is significant: profound health disparities persist and have worsened<sup>v</sup> despite decades of evidence demonstrating the need to focus on health equity and more ‘upstream’ structural and social determinants of health.<sup>vi,vii</sup> Instead of favoring the status quo and dominant perspective, it’s clear that we need to find different approaches to understanding and addressing the conditions driving health.

Workforce development is no different. Public health has a long and thoughtful history in workforce development. However, most current training approaches to workforce development focus on individual competency, and they are often one-off or short-term. These limited approaches are insufficient to shift thinking, learning, and action to dismantle structural inequities. We need to take a systems thinking approach to comprehensively and collectively address health equity. Our learning programs need to examine the underlying assumptions that drive our thinking about complex problems within a community while considering the multiple structures, policy, practices, and programs that may contribute to the problem’s persistence.

### A systems thinking approach to learning in workforce development, and a focus on systems change, are needed to comprehensively and collectively address health equity

To take a systems thinking approach, we must have the capacity to embrace the complexities and richness of our communities. We must be able to turn our collective challenges and strengths into impactful strategies, and “organize complexity into a coherent story that illuminates the causes of problems and how they can be remedied in enduring ways”<sup>viii</sup>. Systems thinking includes synthesis and integration of information - zooming out to see the larger picture while also zooming in to see details - and connecting ideas, resources, and activities where they align. While there is no single definition of systems thinking, five concepts are important:

1. Committing to learning, adopting an inquiry-based, 'what-if' or 'not-knowing' mindset and preparing to see answers or perspectives that challenge one's own thinking
2. Understanding and reflecting on diverse perspectives regarding the challenge
3. Seeing the connections within a system (e.g., networks of people or resources) or between systems, identifying leverage points and feedback loops that reveal opportunities for maximizing resources and benefits
4. Distinguishing between technical and adaptive aspects of complex challenges and looking beyond the obvious issues for root causes
5. Understanding the various pieces within whole systems

As you practice these five concepts, it is important to be grounded in community and systems strengths with an eye toward long-term solutions. This work is about shifting from quick-fix, short-term solutions to identifying the leverage points that will drive larger, more sustainable impacts.

Figure 1: What is Systems Thinking?



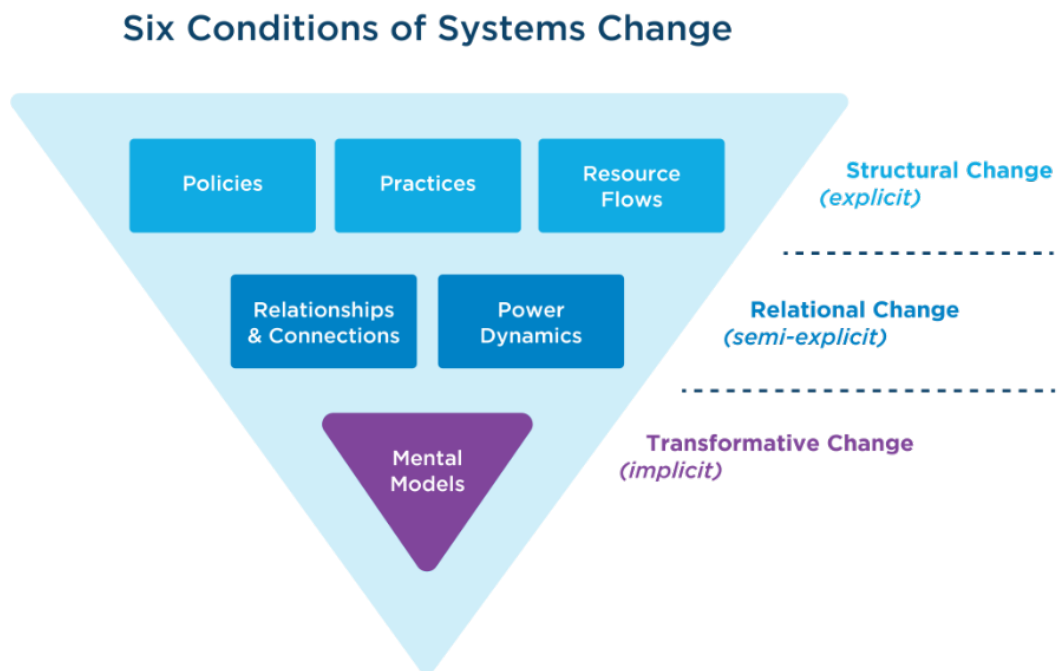
Systems thinking can help identify opportunities for change in new and different ways. Change, at its most basic level, is about shifting our thinking and behavior, moving from a current state to a future state that is different from where we are now. As we approach the root causes of complex challenges, we must consider a variety of perspectives around defining the challenge, its causes, and our pathways forward. We also need to identify opportunities for additional learning required to address root causes of inequities and change historically inequitable systems. For example, what learning is needed to improve housing in neighborhoods that have experienced underinvestment due to racism and other forms of oppression? What learning will support building coalitions and organizing the community to help change policies to provide safe and affordable housing?

Systems change is a collective, relationship-based process that involves diverse groups of people looking at the root causes of complex challenges from different perspectives. Through a shared understanding of the problem - built through dialogue that can only occur through trusting relationships - we can drive reexamination of shifts in power, policy, practices, and resource flows at the core of the challenge.

There are many models for systems change. The Water of Systems Change Model is particularly useful in public health settings (see Figure 2). It articulates six conditions vital to systems change:

- “Policies: Government, institutional, and organizational rules, regulations, and priorities that guide the entity’s own and others’ actions.
- Practices: Espoused activities of institutions, coalitions, networks, and other entities targeted to improving social and environmental progress. Also, within the entity, the procedures, guidelines, or informal shared habits that comprise their work.
- Resource Flows: How money, people, knowledge, information, and other assets such as infrastructure are allocated and distributed.
- Relationships & Connections: Quality of connections and communication occurring among actors in the system, especially among those with differing histories and viewpoints.
- Power Dynamics: The distribution of decision-making power, authority, and formal/informal influence among individuals and organizations.
- Mental Models: Habits of thought - deeply held beliefs and assumptions and taken-for-granted ways of operating that influence how we think, how we talk, and what we do.”<sup>ix</sup>

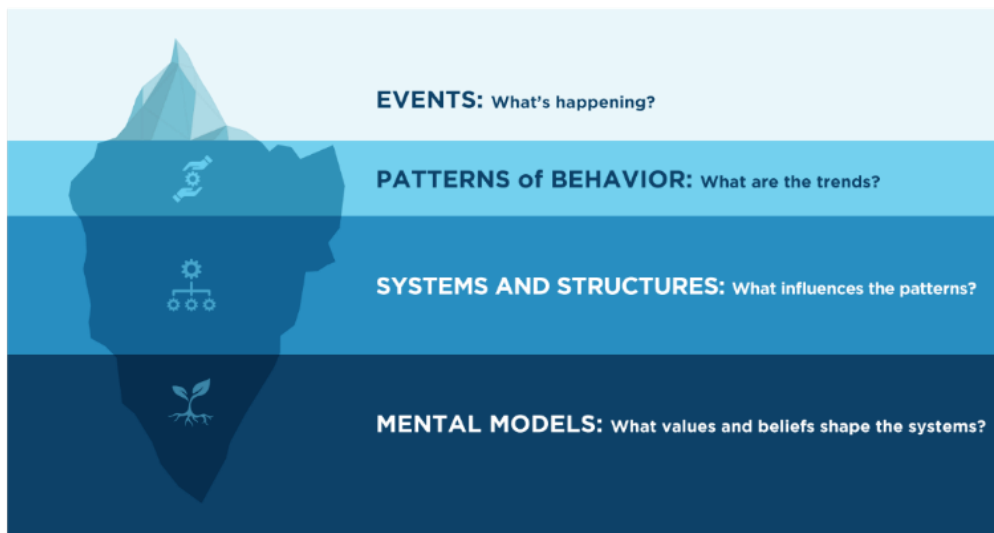
Figure 2: Six Conditions of Systems Change



*The first, most important condition to consider when evaluating complex challenges is our mental models around their root causes.*

An iceberg model is a helpful way to think about how we can evaluate complex challenges in our communities (see Figure 3). For example, let's say you seek to decrease health disparities in rates of diabetes in Black, Brown, and other historically disinvested communities. If you only focus on what you can see on the surface of the problem, your view might be that people are not exercising enough, or that they have unhealthy eating habits. As a result, your proposed solutions would focus on individual behavior change, and your programs and outreach strategies would only encourage people to eat healthier foods and exercise more. However, if you look more deeply at underlying policies, practices, and resources, you can uncover a history of disinvestment in these communities – resulting in a lack of safe parks and greenspace, few sidewalks, and limited access to stores with fresh produce.

Figure 3: Iceberg Model



Mental models are at the base of the iceberg. They drive the beliefs and values that led to fewer loans for local small businesses, commercial real estate, or housing (or even the ability for members of Black and Brown communities to buy or rent at all). Mental models also drive how we in public health define the problem.

To effectively address health inequities, we must move beyond actions solely focused on individual behavior change. We need to recognize the historical and environmental context in which individuals live and shift our own mental models about what is causing the problem. In the example outlined above, we must ask ourselves – how do we make the healthier choice the easier choice? And how do we do so in equitable and sustainable ways?

By practicing systems thinking with a goal of systems change, we begin an important process of identifying our current state so that we can create a more *transformative* future state – beyond individual change, and beyond treating symptoms or quick fixes. We begin to challenge our thinking and assumptions in our mental models and explore new pathways and leverage points through individual and collective transformative learning. NOTE: You can find more resources about systems thinking and systems change in Section 3.

Figure 4: Current State – Future State



### Systems change requires transformative learning

**Transformative learning** is a process that facilitates examination of one’s beliefs; shifts thinking around those beliefs; and ultimately changes behavior. Transactional learning is important, but it tends to focus on tactical, short-term actions and procedures related to goals or projects where generally, the challenge is clear and solvable (i.e., a technical challenge).

- Transformative **individual** learning occurs when we are asked to reflect on our thinking, especially when we compare our thinking with an experience, another idea, or a diverse perspective. This comparison allows for new insights and observations that challenge our own status quo ways of thinking and being.
- Transformative **collective** learning occurs when we participate in a learning opportunity with others, with the opportunity to reflect and process together to explore root causes and diverse perspectives. When learning happens with others, there is a powerful opportunity to find new shared values, beliefs, and ways of operating that can shift cultural norms and foster collective actions toward a shared vision.

Collective learning for systems change is important because it's not just about making changes in how we think, but in how we think together. To really change systems, we need to learn and share ideas in a way that connects us socially. Collective learning creates strong bonds where we can challenge each other's ideas; genuinely appreciate different points of view and come up with new and innovative ways of doing things. Collective learning can lead to culture change (in our example, the water around the iceberg), which fundamentally changes collective mental models.

Throughout the LASC Toolkit 2.0, we will refer to both individual learning and collective learning. In either case, we are focused on the sort of transformative learning required to drive systems change - to develop sustainable responses to inequity and complex challenges.

### Leadership and learning culture

The leadership required to foster transformative learning for systems change goes beyond traditional notions of leadership. A leader is typically defined as the person(s) with the most authority or decision-making abilities, holding the highest position, such as those at ‘the top’ of the organizational chart, or the person(s) with the most technical expertise. Instead, leading for systems change involves facilitating active contribution of the skills of all people at all levels.

Systems change leaders are adept at:

- Listening to and engaging inclusive voices

- Challenging assumptions about the underlying problems and opportunities at hand
- Creating a shared understanding
- Fostering systems thinking to explore sustainable, long-term solutions rather than quick fixes
- Encouraging practices that unlearn unjust, inequitable, and ineffective ways of being to design and shift power and resources toward pathways that enable liberation for all
- Facilitating dialogue across individuals to build individual and collective learning

Effective systems change leaders must create learning cultures - environments that foster learning in positive, generative ways. Change challenges all of us, especially when we are asked to think and behave in ways that may go against the status quo. Systems change leaders must facilitate a smooth transition to the future by uplifting team strengths and planning for and addressing resistance to change. Systems change leaders foster a learning culture in several ways:

- Creating safe and brave spaces to build trusting relationships
- Supporting norms and ground rules for interacting where all people feel seen, heard, and like they belong
- Fostering honest dialogue where questions, decisions and solutions are encouraged from all
- Exposing ways of thinking that may be ineffective or insufficient to address issues of inequity or injustice
- Facilitating environments that help individual and collective team members move from the current state to the future state and overcome the challenge of change
- Defining an achievable co-created definition of the future state
- Creating clear, focused, and organized implementation processes to support learning
- Practicing learning from trial and error with enthusiasm and positivity

In a learning culture, all people are encouraged to learn and grow, to help change individual and collective mindsets and foster collective leadership. By collectively changing our mindsets about traditional and new approaches, we can undertake collaborative actions - those that move toward major transformative shifts in the status quo, build strength and power toward policy and resource shifts, and ultimately help elevate and liberate previously under-resourced communities.

### How can public health workforce development advance transformative learning for systems change?

There are at least three opportunities for public health to use workforce development to lead transformative learning for systems change:

1. Creating workforce development plans that are driven by community and organizational challenges (rather than solely focused on individual roles and competency development).
2. Delivering workforce development that is adapted to the challenge it is intended to address (rather than taking a one-size-fits-all approach to training).
3. Ensuring that workforce development is integrative, reflective, and adaptive to the complex challenges practitioners are responding to in a changing environment.

Let's look more closely at each of these opportunities:

### Creating workforce development plans that are driven by community and organizational challenges

Public health has a long history of setting profound visions to create healthy people in healthy communities. While strategic plans, community health assessments, and community health improvement plans lay out steps to achieve this vision, workforce development plans and approaches often do not align with the associated goals, objectives, and action plans. In addition, most workforce development plans do not center on the root causes of inequity.

To shift learning, our workforce and our partners should be responsive to complex community or organizational issues, not just individual job titles and functions. Workforce development approaches should align with our community health assessments and help support our community health improvement plans. We need to ask ourselves: What approaches are required to address our community health priorities? How can our workforce be prepared to execute those initiatives?

For example, if our community health improvement plan calls for addressing policy strategies to reduce chronic disease, how is our workforce prepared to support that? If a strategic plan strives to achieve health equity, how prepared is the workforce to facilitate community-grounded approaches? Our training plans need to build individual and collective skills for effectively engaging communities; collaborating across multiple sectors; supporting policy, systems and environmental change; and creating a shared vision to catalyze equity.

#### [Delivering workforce development that is adapted to the challenge it is intended to address](#)

Complex public health challenges like chronic disease, mental health, or drug misuse are rooted in social systems of inequity and injustice. These big systems challenges cannot be solved by individual behavior change interventions alone. Neither can they be solved by building individual technical skills or addressing gaps in individual competencies alone. Transactional approaches that foster individual programs and behavior change are likely to have limited impact on improving population health and driving equity.

We need new ways of thinking about complex challenges. When we look at them not through the eye of individual positions, but from the perspective of communities - living systems that are dynamic and adaptive, with strengths, assets, opportunities, and challenges that change over time - we can see how we may need to change our approach to learning. We can better understand how transformative learning can drive systems change that responds to the complexity of communities and their situations. In other words, complex challenges, require complex learning approaches that consider length and dose of the training, who needs to participate and at what levels of impact, what modalities of learning should be considered, and if the learning needs to be layered with other learning. This doesn't mean that individual learning or short-term trainings such as webinars won't still occur—but their topics and usage alongside other learning may be different.

#### [Ensuring that workforce development is integrative, reflective, and adaptive to the complex challenges practitioners are responding to in a changing environment](#)

Complex challenges are not stagnant; neither are humans. We adapt to the situation and environment at hand. While it is important to have a workforce development plan that can be reasonably followed and measured, we need to find ways to stop, reflect, and revise plans in ways that promote deeper learning about what is working and what is not. This helps us to understand if and how our mental models have shifted, what skill-building is needed, and through what modalities.

Instead of a plan, which can be linear and stagnant, an agenda guides our work based on unique circumstances and communities; allows for learning in action and reflection; and reevaluates progress toward the change underway.

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*Rather than a workforce development plan for individual positions and functions, we need an agenda that serves as a living document for groups of diverse people to learn about, experiment with, and reflect upon collaborative actions focused on policy and systems approaches alongside the thinking and behavior needed to implement them.*

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The Learning Agenda for Systems Change begins to address the opportunity for community-centered, equity-forward approaches to learning

There are few frameworks that help the public health workforce consider the principles, processes, approaches, and skills needed to advance systems change. The LASC Toolkit 2.0 encourages problem solving that goes beyond short-term solutions like personal health programs. It facilitates shared leadership, supports shifts in thinking, and informs collaborative action for policy and systems change.

It also aligns with a new way of thinking for workforce development. Approaches like this can transform our impact - from hundreds or thousands of people to hundreds of thousands - while supporting health justice through sustainable change in policy and practice.<sup>x</sup>

### Overview: What is the Public Health Learning Agenda for Systems Change?

The Public Health Learning Agenda for Systems Change (LASC) is an action-oriented, evidence-informed, field-tested process for organizations, as well as their partners and communities, to use transformative learning as a driver for equity-focused systems change. It facilitates iterative, collective processes to identify and address the root causes of today's complex public health challenges, creating multi-level, multi-pronged learning approaches. The LASC Toolkit 2.0 integrates community health improvement plans, organizational strategic plans, and workforce development approaches, always centering equity and the culture change needed for communities and systems to improve economic, social, and overall health and wellbeing.

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*Vision: Communities are thriving and leading innovative approaches to improve their economic, social, and overall health and wellbeing.*

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Developed and tested by a nationwide network

In 2020, the [Public Health Training Center Network](#) (PHTCN) and the University of Illinois Chicago [Policy, Practice and Prevention Research Center](#) (P3RC) developed an innovative free resource called *Creating a Learning Agenda for Systems Change: A Toolkit for Building an Adaptive Public Health Workforce (The LASC Toolkit 1.0)*. That original Toolkit was built in response to multiple workforce needs assessments that called for learning approaches to address equity, be more responsive and collaborative with the community, and drive systems change in ways that address the root causes of today's complex challenges.<sup>xi, xii, xiii, xiv, xv</sup>

The LASC Toolkit 1.0 was piloted and evaluated in 2021<sup>xvi</sup>; results were shared with a Steering Committee of national, state, regional, local and hyperlocal representatives. The Steering Committee provided multiple recommendations, including:

- Participants noted that the LASC Toolkit 1.0 was designed for experienced individuals; it needed to be accessible to a wider audience - with plain language; graduated concepts from basic to advanced; and connection to existing tools and processes (e.g., Mobilizing for Action through Planning and Partnerships (MAPP))
- The next version of the toolkit needed to expand the focus on readiness to engage in systems thinking and deepen emphasis on community engagement
- Finally, the toolkit needed to be more easily actionable, with more instructions and resources for implementing the resulting learning opportunities

Based on these findings, a team of PHTCN and P3RC members revised the original LASC Toolkit to address its gaps and strengthen its process. The LASC Toolkit 2.0 is the result of that work. It was co-created by the PHTCN and P3RC representatives with strong influence from our practice and academic partners.

### Understanding the Framework: The Roadmap for Your Learning Journey

Developing a Learning Agenda takes time, and it's an iterative process. Figure 5 provides an overview of the four Foundational Principles and five Phases of the LASC Framework.

Figure 5. Learning Agenda for Systems Change Framework



### Four Foundational LASC Principles

Creating a Learning Agenda requires a baseline level of readiness - commitment, capacity, and knowledge. More specifically, your team must have some understanding of the principles of equity, systems thinking, engagement and relationship building, and leadership. (NOTE: A Readiness Assessment is included in the LASC worksheets that are part of Section 3).

## Equity

The LASC's central focus is to facilitate transformative learning toward policy, systems, and environmental approaches, ultimately creating equity-focused, just, and inclusive communities and organizations. Many of the complex challenges perpetuating health disparities are caused by inequitable access to the power and resources that enable all people to have what they need to be healthy. To dismantle inequity and inspire new ways of thinking, equity is central to the LASC process and outcomes.

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*The Essential Services Framework defines Equity as "... a fair and just opportunity for all to achieve good health and well-being. This requires removing obstacles to health such as poverty and discrimination and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and healthcare. It also requires attention to health inequities, which are differences in population health status and mortality rates that are systemic, patterned, unjust, and actionable, as opposed to random or caused by those who become ill"<sup>xvii</sup>*

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## Systems Thinking

Systems thinking refers to our ability to see a challenge and its root causes from different perspectives, not relying on our own assumptions about what we think is causing or defining the challenge. It requires us to see the various levels of a problem and the systems within which it might exist. The process of systems thinking eventually leads to identifying small openings and connections to leverage greater change.

## Engagement and Relationship Building

The heart of systems change work is engaging and building relationships within your organization, with partners, and across the community. Engaging with others requires challenging "the status quo to support a different way of being together that prioritizes relationship development, trust building, and bringing our whole selves to the work of changing the systems"<sup>xviii</sup>. Engaging and building relationships is vital to creating safe and brave spaces for open and honest dialogue, reflection, growth, and learning.

## Leadership

Effective leadership is required to foster transformative learning for systems change. Leaders must be able to facilitate an environment for the active contribution of the skills of all people, at all levels. Leadership for systems change goes beyond traditional hierarchical notions of leadership where only a few people have authority. Instead, systems change leadership fosters a process to understand the diverse perspectives of many to identify the root causes of inequity and pathways for sustainable change toward a shared vision.

## Five phases of LASC: an iterative process

Described as a Learning Agenda, LASC is meant to help the public health workforce and their partners create Learning Plans aimed at specific community or organizational challenges focused on social and structural determinants of health. The Learning Plans can be adapted through cycles of application and

reflection as learners identify more opportunities for systems change. The LASC process includes five phases of a learning journey:

- Phase 1: Foundational Readiness Planning where a team is either built or strengthened by stating its goals for the LASC process; establishing team ground rules and roles and responsibilities; and analyzing baseline knowledge and need for additional training in the Foundational Principles (e.g., training and experience in systems thinking).
- Phase 2: Define the Challenge & Create the Vision includes stating a community or organizational challenge; exploring its root causes; selecting one root cause to center the LASC Learning Plan; and developing a time-bound desired future state and vision that addresses the challenge.
- Phase 3: Design a Learning Plan includes an exploration of what knowledge, skill, and attitude changes are needed to address the conditions of systems change and implement the vision.
- Phase 4: Implement & Evaluate guides your team through implementation and identifies opportunities to evaluate your LASC Learning Plan.
- Phase 5: Reflect & Revise includes processes and tips to strengthen the Learning Plan to influence the next cycle – when you return to Phase 1 to revisit the team composition, leadership, facilitation training, etc. or to another Phase to revisit root causes.

It's important to note that the Framework is not always linear in practice. Each phase or component may require revisiting the ones before it, or you may find yourself working on several phases simultaneously. From the beginning, it is important to include milestones to track progress and to consider how you're going to keep people engaged.

### [How to use the LASC Toolkit 2.0](#)

Now that you've read LASC Section 1, you are ready to begin. In Section 2, you will be guided on a journey through each of the five LASC phases. While Section 2 is presented in a linear fashion, remember, this is an iterative, responsive process. After your first time through the LASC, you may decide to revisit any or all phases, in any order.

As you move to Section 2 of the LASC Toolkit 2.0, each of the five phases will include the following:

- Key Terms: Terms and definitions introduced in a phase are listed at the beginning of that phase (*in Section 1 they are included at the end*). The entire list also appears alphabetically in the Glossary in Section 3.
- Steps: An overview of the steps within each phase is presented at the beginning of the phase, followed by a detailed description.



- Worksheets: Look for this icon alongside each step. A blank worksheet template is included in Section 3 for your team's use to document its progress.
- Example Diabetes Challenge: An example of the LASC process is referenced throughout Section 2. The full diabetes challenge example worksheet can be found in Section 3.
- Tips: These suggestions collected from pilot testers and early adopters of the LASC are included in each phase to support your implementation.
- Resources: Additional resources to support specific elements of this work (e.g., facilitation, community engagement, training development, evaluation, etc.) are noted throughout Section 2 with this icon. Resources are organized by phase in Section 3.

### A Wide Range of Helpful Resources

There are many resources in the LASC Toolkit 2.0. Additional training, resources, and technical assistance can be found by visiting our website at [www.publichealthlearningagenda.org](http://www.publichealthlearningagenda.org) or connecting with your Regional Public Health Training Center through [www.phtcn.org](http://www.phtcn.org).

## Key Terms

- **Collective Learning** “is a process where a group of people acquires skills, knowledge, and behaviors through interactions with each other and their environment. This includes sharing experiences and information and collaborating to solve problems. The result is a collective understanding and intelligence that can enhance the group’s ability to innovate new solutions.”<sup>xix</sup>
- **Interest Holders** include individuals, groups, or organizations that have an investment in a particular issue. Interest holders include those who are personally affected by an issue, those whose constituents are affected by an issue, and those with power or influence over some element of the issue. Interest holders may have different opinions about and experiences with the issue.<sup>xx</sup>
- A **Learning Agenda** is an action-oriented process for organizations, their partners, and communities to use transformative learning as a driver for systems change. A Learning Agenda is also a product containing a dated record from each phase of work. Your Learning Agenda product is captured in the LASC worksheet included in Section 3 and will include:
  - Readiness assessment results including team members and viewpoints present or missing, leadership of team and organizational leadership buy-in, and experience with or training in systems thinking (from Phase 1, *Foundational Readiness Planning*)
  - Challenge and vision statement for the organization or community, the contributing factors to the challenge and the selected adaptive factor, and the focused sub-factor challenge, time-bound desired state, and vision statement (from Phase 2, *Identify and Define the Challenge & Create the Vision*)
  - Logic Model, a Learning Plan, and a list of potential collaborators (from Phase 3, *Design a Learning Plan*)
  - Implementation Plan (including plans for Collaboration, Resources, Project Management, and Communications) and an Evaluation Plan (from Phase 4, *Implement & Evaluate*)
  - Gathered data/worksheets to be used in facilitated reflection on your progress and readiness for the next cycle of learning for systems change (from Phase 5, *Reflect & Revise*)
- A **Learning Culture** is an environment that fosters learning in positive, generative ways.
- The **Six Conditions of Systems Change**, defined in The Water of Systems Change Model, include policies, practices, resource flows, relationships & connections, power dynamics, and mental models.
- **Systems Thinking** includes synthesis and integration of information - zooming out to see the larger picture while also zooming in to see details - and connecting ideas and resources and activities where they align. While there is no single definition, five concepts are important to practice systems thinking<sup>xxi</sup>:
  - Committing to learning. This means adopting an inquiry-based, ‘what-if’ or ‘not-knowing’ mindset and preparing to see other answers/perspectives that challenge one’s own thinking
  - Understanding and reflecting on diverse perspectives regarding the challenge
  - Seeing the connections within a system (e.g., networks of people or resources) or between systems, interconnections, leverage points, and feedback loops that reveal opportunities for maximizing resources and benefits

- Distinguishing between technical and adaptive aspects of complex challenges and looking beyond the obvious issues for root causes
- Understanding the various pieces within whole systems
- **Systems Change** is a collective, relationship-based process that involves diverse groups of people looking at the root causes of complex challenges from different perspectives. Through a shared understanding of the problem - built through dialogue that can only occur through trusting relationships - we can often drive reexamination of shifts in power, policy, practices and resource flows at the core of the challenge.
- **Transformative Learning** is a process that facilitates examination of one's beliefs; shifts thinking around those beliefs; and ultimately changes behavior.
  - **Transformative individual learning** occurs when individuals reflect on their own thinking and compare their thinking with an experience, another idea, or a diverse perspective. This comparison allows for new insights and observations that challenge status quo ways of thinking and being.
  - **Transformative collective learning** occurs when individuals participate in a learning opportunity with others, with the opportunity to reflect and process together to explore root causes and diverse perspectives. When learning happens with others, there is the opportunity to discover shared values, beliefs, and ways of operating that can shift cultural norms and foster collective actions toward a shared vision.

## Section 2: Five Phases of the LASC Process

### Phase 1: Foundational Readiness Planning

Welcome to Phase 1: Foundational Readiness Planning! As you begin your LASC journey, understanding and strengthening your team's readiness to undertake the process will increase your likelihood of reaching your transformative learning goals for systems change. In this phase, we will define readiness for systems change and share assessment tools your teams can use to explore your knowledge of systems change and team functioning. These assessment tools will help you to define what, if any, training or exercises may help you prepare for systems change before you begin the process. Have questions? Need additional resources? Visit Section 3 and [www.publichealthlearningagenda.org](http://www.publichealthlearningagenda.org).

#### Key Terms:

- **Effective teams for systems change** ideally have diverse strengths, expertise, perspectives and experience; establish trusting relationships where authentic dialogue occurs to uncover and discuss mental models; co-create a common vision and goals for both the LASC process and their work as a team; and have clear roles and responsibilities within the team and the LASC process.
- **Readiness for systems change** means individuals, teams, and organizations have the knowledge, experience, shared vision, trusting relationships, and capacities to undertake a collective process of transformative learning.

#### Introduction

The Learning Agenda for Systems Change (LASC) begins with readiness planning. Developing transformative learning for equity-focused systems change can be a significant undertaking; it requires a shared commitment, strong relationships within the team, and readiness to do the work. Understanding your team's assets and capacities and establishing or building upon your team's operating approaches will strengthen your team's LASC journey.

The LASC was designed to be used by individuals and organizations with varying levels of experience in public health, workforce development, or systems change. The process acknowledges that each community group and organization can be at a different readiness to foster transformative learning. Your starting point is guided by your own past systems change work, as well as your relationships, resources, intended impact, and scope of work.

In Phase 1, we recommend that you and your team assess your individual and collective knowledge, experience, assets, shared vision, and capacities to take on this work. This will help your team to identify areas you might need to strengthen before moving onto Phases 2-5; understand the assets of your team to build upon and leverage; set realistic expectations for the work ahead; and shape the process that aligns best with your unique level of readiness. In this section, we will describe three important LASC readiness elements and the LASC's Four Foundational Principles of Systems Change. For each of these areas, you will have the opportunity to assess your team's readiness as you consider building your capacity for the LASC process and transformative learning.

#### *Why is Phase 1 important?*

Undertaking systems change has the potential for great impact. It also requires serious commitment and preparation. Readiness for systems change can be a complex process, and there are many ways to define it. Simply put, readiness is having the knowledge, experience, shared vision, relationships,

resources, and capacities to undertake transformative learning at a pace and scope that team members and partners can manage. Preparing for anticipated changes will increase your team’s likelihood of reaching your goals in the LASC process.

Phase 1 is important because it sets the stage for the LASC process. Transformational learning is rooted in our ability to identify our mental models about the root causes of problems and find generative solutions that involve shifts in power and resources. This requires creating safe and brave spaces for teams to dialogue; share authentic opinions and experiences about the complex challenge and what is really going on in the community; share what resources and approaches have worked or not worked; and uncover opportunities for change. Readiness for systems change starts with building or strengthening relationships and centers on how we are together and who we are together – building an effective team that advances and amplifies our collective capacities toward a shared vision.

Phase 1 helps build readiness through two levels of assessment before engaging in the primary LASC work. First, LASC team members will assess three elements to consider their functioning as a team: clarify the team’s role and purpose in the systems change process; identify/discuss shared goals and vision; and consider new team members who need to be added. This requires that the team have collective practices for facilitation that fosters systems thinking, and shared values and norms (often in the form of ground rules) to generate meaningful conversations and manage conflict. Finally, effective change through your LASC team also requires thinking about change leadership, implementation, and evaluation plans.

Second, your team will assess your organization or community’s readiness for systems change based on LASC’s Four Foundational Principles of Systems Change (Equity, Systems Thinking, Engagement, and Leadership). You will consider your shared knowledge and experience with these concepts and their operationalization to determine if your team needs additional training to prepare for and practice the activities of the LASC process. Past experience with the LASC (and other systems change efforts) indicates that a foundational level understanding of equity, systems thinking, engagement, and leadership concepts can catalyze transformative learning more effectively and minimize change implementation hiccups.

Having never done this kind of work before doesn’t mean your team shouldn’t embark on this worthy effort, but you may need to strengthen your foundation of readiness to be successful. The assessment process will help you determine what you might need to strengthen before beginning and set realistic expectations for the work ahead. If you feel that you are at a high level of readiness for systems change towards health equity, then we challenge you to go further than you have before and use this process to address deeper root causes of systemic and structural challenges in your community.

Phase 1 includes three steps:

- Step 1: Consider elements of team functioning
  - Step 1a. Team Development: Build and strengthen an effective team
  - Step 1b. Team Facilitation: Establish team facilitation and group norms
  - Step 1c. Process Management: Develop plans to implement and evaluate process
  - Step 1d. Assessment
- Step 2: Consider the four Foundational LASC Principles
  - Step 2a. Equity
  - Step 2b. Systems Thinking
  - Step 2c. Engagement and Relationship Building

- Step 2d. Leadership
- Step 2e. Assessment
- Step 3: Reflect on your readiness score and determine next steps

So, let's begin laying the foundation for this important work!

### Step 1: Consider elements of team functioning

Complex challenges requiring systems change also require diverse teams that are comfortable working together. Effective teams for systems change ideally include a variety of strengths, expertise, perspectives, and experience; establish a common vision and goals for the LASC process and team dynamics; and have clear roles and responsibilities within the team. Having team norms and guidelines, as well as a skilled facilitator, is especially crucial.

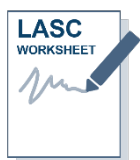
As you set out, it's important for your team, and the leaders supporting this work, to realize that this will require human and fiscal resources. In addition, the team will need to evaluate and reflect on their progress throughout the process to make quality improvements along the way.

#### Step 1a: Build and strengthen an effective team

As you are reading this, your organization or community probably has an initial interest in a challenge they would like to address, and we hope they have assembled a team to work together on this. Consider for a moment if other interest holders should be added to your team to increase the diversity of strengths, expertise, perspectives, and experiences. Some questions you might ask are:

- Who is directly affected by this challenge or issue?
- Can we add someone with lived experience or working in this space to the team? In what roles?
- What community partners care about this issue?
- What groups or partners are in positions to influence the environment or policies that might be contributing to this issue?

Sometimes it's hard to think outside our organizations and scope of work, so you might start with a simple internet search for other organizations in your community with aligned interests and work.



Document your insights in Phase 1, Step 1a LASC worksheet in Section 3.

If you haven't done systems thinking work like this in the past as a way to consider potential relationships and partners, you may want to create a relationship map. Working through one or more of these to identify interest holders mapping would be a great project for a student intern! See Section 3 for information about relationship mapping.

#### Step 1b: Establish team facilitation and group norms

Systems change requires us to think differently, and disagreements are likely to occur. Your team will need facilitation approaches that align with systems thinking and that foster healthy, constructive dialogue in well-managed meetings.

Skilled facilitators are essential to this process. Practicing facilitation methods that prioritize diverse learning styles and avoiding traditional approaches that may be exclusionary will support group success. Facilitators who focus on listening, rather than problem-solving, will help move the process forward.

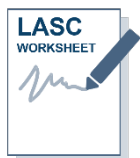
Facilitation is a way of listening through and beyond the words being spoken, feeling for the current belonging underneath what can be spoken, listening through the fear, listening through the scar tissue: What is possible? What is the next step towards that possibility?<sup>xxii</sup>

Group facilitation is a process in which a person whose selection is acceptable to all members of the group – who is substantively neutral and who has no substantive decision-making authority – diagnoses and intervenes to help a group improve how it identifies and solves problems and makes decisions, to increase the group's effectiveness.<sup>xxiii</sup>

There are several facilitation resources that may help both new and experienced facilitators. These include basic training for facilitation from the Institute for Cultural Affairs; tools and approaches for fostering dialogue from the National Coalition for Dialogue and Deliberation; techniques for handling conflict in generative, compassionate ways from Crucial Conversations; and finally, appreciative approaches to facilitation from the Center for Appreciative Inquiry. See Section 3 for a list and description of these resources.

You will need to develop a team charter to document processes (decision making, roles and responsibilities, etc.) and agree on what to do in the event of leadership turnover. Clearly documenting decisions and next steps will help manage the process, as well. Your team should document decisions on:

- Who is serving as coordination lead? Who is responsible for implementing the work?
- What process will be used for decision-making?
- What is the timeline?
- How will the multiple partners implementing the work stay connected and in communication with each other?



Complete the charter worksheet in Phase 1, Step 1b LASC worksheet in Section 3.

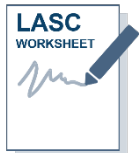
#### *Step 1c: Develop plans to implement and evaluate process*

Before you start, it will be important to understand the resources available to you to support your LASC work. Public health and other community organizations usually operate in an environment of insufficient or irregular funding and limited staff time. Time and resource allocations necessary for effective LASC work require leadership support to be sustainable. At the start of this work, teams should have a clear understanding of:

- What leaders and key sponsors can endorse the team's undertaking of LASC?
- What human, physical, fiscal and other resources might be offered by leaders and key sponsors?
- What team members and platforms are available for project management, work plan development, and process evaluation?

Teams should understand that there are risks and benefits associated with systems change and be prepared for what might occur because of changes. Your team should know how your leaders feel about those changes and be aware of what leadership support you may need (and when you may need it). You will also need to understand which approaches to work may need to change, and who will be impacted by that change. Finally, you will need to understand how process change and evaluation happen within your organization and those of your partners.

- Do your teams regularly build in process evaluation and outcome evaluation in their work?
- Can you envision making time for reflection and identifying and acknowledging where conflicts need to be resolved?
- How is quality improvement currently done in your organization and those of your partners? How can your team document and suggest process changes that will be widely adopted?



Document your thoughts on these key questions in Phase 1, Step 1c LASC worksheet in Section 3.

*Step 1d: Assess*

Now that you’ve given these three elements of team functioning some thought, consider where your team is in its readiness journey by using the following scale<sup>xxiv</sup>:

Early		Established		Strong	
1	2	3	4	5	6
Not yet or learning stage	Planned but not started or in initial/pilot stages of implementation	Working towards this but not fully achieved	Fully achieved	In place with evidence of its use (e.g., policies, procedures, robust evaluation plan)	Practices are sustainable and ongoing and may be shared with others as “best practices”

1. Our team has the diversity of strengths, expertise, perspectives, and experiences needed to do this collective work.

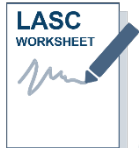
It could be that your team has a few members, but you realize that you need to add more members with lived experiences or from other organizations who have an interest in this issue and could influence the work. So, maybe you say you’re a 2 or a 3. That’s okay – lower ratings just indicate areas of growth for your team.

2. Our team has team facilitation approaches and group norms in place.

Whether you are initiating new team norms and processes or strengthening existing ones, there are many tools and resources available to you. One that we find especially helpful is the chapter entitled “Developing Teams for Systems Change”<sup>xxv</sup> found in the book *Leading Systems Change for Public Health*<sup>xxvi</sup> found in Section 3.

3. Develop plans to implement and evaluate:
  - a. Our team has leadership and key sponsor support.
  - b. Our team has experience creating implementation plans that includes resource allocation.
  - c. Our team is prepared to create an evaluation plan for the LASC process.

You may find that your team has some of these elements in place, while you need to build your capacity in other areas.



Complete the assessment in Phase 1, Step 1d of the LASC worksheet in Section 3 to document how you would score your team on the first three elements of readiness.

### Step 2: Consider four Foundational LASC Principles

LASC facilitates transformative learning around policy, systems, and environmental approaches, ultimately creating equity-focused, just and inclusive communities and organizations. In addition to the operational readiness aspects discussed above, your team’s work must also be grounded in the principles of equity, systems thinking, engagement and relationship building, and leadership introduced in Section 1.

#### Step 2a: Equity

Many of the complex challenges perpetuating health disparities are caused by inequitable access to the power and resources that enable all people to have what they need to be healthy. To dismantle inequity and inspire new ways of thinking, equity is one of the four foundational principles of the LASC process and outcomes.

So, what does this look like for your team? It means that all members of your team should understand the definitions of and differences between diversity, equity, inclusion, and liberation.<sup>xxvii</sup> In addition, they should have knowledge, understanding, and experience of why it is important to address the structural and social determinants of health, and the role that initiatives like LASC can play in creating positive change. Your team should also understand the history of oppression, injustice, and other inequities in your community.

Teams should discuss the benefits, concerns, potential opportunities, and risks of focusing on equity in your organization and community. As a significant step, your team should develop a common understanding and shared vocabulary around lived experiences regarding equity and inequities, justice and injustices.

#### Step 2b: Systems thinking

Systems thinking refers to our ability to see a challenge and its root causes from different perspectives, not relying on our own assumptions about the definition and causes of the challenge. It requires us to see the various levels of a problem and the systems within which it might exist. The process of systems thinking eventually leads to identifying small openings and connections to leverage greater change.

To do LASC work, the members of your team should have some recognition of systems thinking tools and processes, and of their role in systems change. Ideally, some members of the team should have experience implementing systems thinking initiatives like Policy, Systems, and Environmental change, as well as documented evidence of systems thinking efforts in the organization or community to date.

#### Step 2c: Engagement and relationship building

The heart of systems change work is engaging and building relationships within your organization, with partners, and with the community. Engaging with others requires challenging "...the status quo to support a different way of being together that prioritizes relationship development, trust building, and bringing our whole selves to the work of changing the systems".<sup>xxviii</sup> Engaging and building relationships is vital to creating safe and brave spaces for open and honest dialogue, reflection, growth, and learning.

Teams should assess the quality, history, and depth of existing engagement with team members, across the organization, and/or with the community to gauge areas that might need improvement. Strong teams are those that ensure diverse strengths, assets, and knowledge base. In addition, teams should have community engagement processes in place that center those with lived experiences and share power. As discussed earlier in this Phase, teams should always have a plan in place to authentically include other interest holders as you work through different parts of the Learning Agenda (for instance, when you begin to finalize your LASC focus audience of impact).

#### Step 2d: Leadership

Effective leadership is required to foster transformative learning for systems change. Leaders must be able to facilitate an environment that invites the active contribution of the skills of all people, at all levels. Leadership for systems change goes beyond traditional hierarchical notions of leadership where only a few people have authority; instead, systems change leadership fosters a process to understand diverse perspectives of many to identify the root causes of inequity and pathways for sustainable change toward a shared vision.

For the LASC process, leadership should be shared by all team members and center the voices of those with lived experiences. Teams will need to create a statement of the intent and purpose of the LASC process, and they should clearly understand the differences between transactional and transformational change.

#### Step 2e: Assess

Gauge your team's readiness on the four Foundational LASC Principles using the same scale as before.

Early		Established		Strong	
1	2	3	4	5	6
No work yet or learning stage	Planning not started or in initial/pilot stages of implementation	Working towards this but not fully achieved	Fully achieved	In place with evidence of its use (e.g., policies, procedures, robust evaluation plan)	Practices are sustainable and ongoing and may be shared with others as “best practices”

1. Our team can define and explain the importance of equity and ensure that it has a common understanding and shared vocabulary regarding equity, inequities, justices, and injustices.
2. Our team understands systems thinking and has tools and processes in place to implement systems thinking initiatives.
3. Our team has engaged and built authentic relationships with organizations, partners, and the community needed to do this work.
4. Our team has effective leadership in place to work with the group to create a statement of purpose for the LASC process.



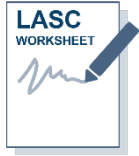
Gauge your team’s readiness on the four Foundational LASC Principles with the assessment in Phase 1, Step 2a-2d of the LASC worksheet in Section 3. You will continue to use the same scale as above.

Step 3: Reflect on your readiness score and next steps

At this point, you’ve been introduced to three important readiness elements (building the team, facilitation, implementation, and evaluation) and the Four Foundational LASC Principals (equity, systems thinking, engagement and relationships, and leadership). With each of these, you’ve assessed your team’s readiness to embark upon the work and identified:

- Additional training you may need before you begin
- Work you may need to pursue, such as:
  - Processes like facilitation and team roles/responsibilities that must be defined to ensure effective meetings
  - Team building approaches that will foster authentic dialogue to shift mental models
  - Ways to strengthen leadership buy-in for the potential outcomes
  - Current and future resource requirements
- When to start the next phase of the LASC

Step 3a: Add Up Your LASC Team Readiness Assessment Score



Add up your score from the seven assessment questions in Phase 1, Step 3a of the LASC worksheet in Section 3. Review the table below to better understand your overall readiness.

The three ‘levels’ of systems change readiness in Table 1 below align with the LASC Readiness Assessment scores. This chart was designed to help you and your team consider where you may be on your journey. These ‘levels’ are not intended to be cut and dry – they represent a

spectrum, and you may have a higher 'readiness' on one foundational principle than another. These levels should provide a sense for what next steps your LASC team may want to consider. Three examples are provided, along with next steps for teams at each of three readiness levels: Early, Established, and Strong. See Section 3 for resources to increase your readiness.

Table 1: Example Team Readiness Levels and Next Steps

Score	Readiness for systems change and health equity	An Example from the Field	Next Steps
9 – 18	Early Readiness	<p>We are a small team (or I am working as an individual) and want to learn more about how to foster systems thinking. We have some exposure to systems thinking at the introductory level. Our challenge is still likely a health-focused, symptom-level problem and our agency’s activities impact individual changes (but don’t go beyond). We want to identify how we can address equity in this challenge. We may work in the community or have community partners, but our projects are transactional or focused activities, not policies and systems change. The community partners at all levels may or may not have been involved in identifying the challenge. We want to identify Policy, System, and Environmental (PSE) changes and understand what learning/trainings are needed in our agency and community to better approach and implement these changes.</p>	<p><b>Trainings and Resources:</b> Looking at your assessment, what areas does your team need to learn more about before moving onto Phases 2-5? Your team may need systems thinking or facilitation training, or to recruit additional members.</p> <p><b>Work to Increase Your Team’s Readiness:</b> Looking at your assessment, what work does your team need to do (strengthen team, seek facilitator, develop policies, etc.) to ensure it can seriously commit to working with each other and partners for systems change?</p> <p><b>Decision about Moving to Phases 2-5:</b> When your team self-assesses at an “established readiness” level, your team will have more confidence in moving forward to Phases 2-5.</p>
19 - 36	Established Readiness	<p>We have been working with a diverse group of organizational and public health partners for a few years on a community or systems challenge. Our team has a working charter and has discussed some of our community/systems history around inequities. We have experience with project management and implementation of efforts. We understand and have worked with, to some extent, partners that are not only public health or healthcare but represent the social and structural determinants of health (e.g., transportation, education, housing, etc.). We would</p>	<p><b>Trainings and Resources:</b> Looking at your assessment, what areas does your team need to learn more about before moving onto Phases 2-5? This team wants to learn even more about the structural and power imbalances and strategies to address these imbalances.</p> <p><b>Work to Increase Your Team’s Readiness:</b> Looking at your assessment, what work does your team need to do (strengthen team, seek</p>

		<p>like to expand our partners across the community and/or system and strengthen our collaboration. We have worked to adopt and even implement PSE changes in our organization and maybe even the community. We have participated in a basic evaluation of our work, even describing and quantifying the impact. We have received some training on systems thinking and PSE change work. We want to expand or strengthen our PSE change and social determinants of health work either throughout our health department, across/with other partners, and/or communities to increase constituency and support for our efforts. We want to learn even more about the structural and power imbalances and strategies to address these imbalances. Our health agency and partners are ready to explore a shift in how we do our work – from social service or direct service to a systems perspective. We want to build more of a social movement.</p>	<p>facilitator, develop policies, etc.) before moving onto Phases 2-5? This team may want to consider adding interest holders. This established readiness level has a strong knowledge and credibility, and likely many relationships, but may need to build sustainable resources to move this work forward sustainably.</p> <p><b>Decision about Moving to Phases 2-5:</b> As an established readiness level, this team should identify the two or three critical needs before moving forward to Phases 2-5.</p>
37 - 54	Strong Readiness	<p>We have been working with a diverse group of public health partners for a few years on a community or systems challenge. We may even have a coalition or partnership that expands across the community or system or state. We may have a strategic plan or agenda and/or am implementing our community health improvement plan. We may have working groups to achieve our shared efforts. Our team has a working charter, a shared analysis of our community/systems history around inequities, and experience with project management and implementation. We have participated in evaluation work. We understand and have worked with partners that are not only public health or healthcare but represent the social and structural determinants of health (e.g., transportation, education, housing, etc.). We have worked to adopt and even implement PSE changes in this work. We could provide</p>	<p><b>Training and Resources:</b> In this case, team leaders may not need to do any training, but they may want to establish training/self-assessment criteria for new team members to strengthen their individual skill sets.</p> <p><b>Work to Increase Your Team’s Readiness:</b> The primary work that a team at this level may pursue is clarifying the team leadership role, planning for resources, and working to build alliances across organizations.</p> <p><b>Decision about Moving to Phases 2-5:</b> Your team should feel confident moving forward to Phases 2-5.</p>

		<p>training on basic systems thinking and PSE work or even some technical assistance to others. However, we want to expand or strength our PSE and social determinants of health work across/with other partners, and/or communities to increase constituency and support for our efforts. We want to learn even more about the structural and power imbalances and strategies to address these imbalances. We may want to launch our own community wide training, conference, or effort to renew and launch a social determinants of health PSE initiative to engage policy makers or other decision makers to deepen our social movement for equity.</p>	
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Training and resources for the elements of team functioning and the four Foundational LASC Principles can be found in Section 3.

Developing transformative learning for equity-focused systems change can be a significant undertaking. It's also important work – you and your team should be commended for exploring the possibilities for positive change! Assessing where you are now is a necessary first step in the process. We will re-evaluate your progress along your journey in Phase 5.



Document your ideas for next steps to increase your team’s readiness in Phase 1, Step 3a LASC worksheet in Section 3.

## Phase 2: Define the Challenge & Create the Vision

Welcome to Phase 2: Define the Challenge & Create the Vision. As we did in Phase 1, we will define some key terms and concepts. Then we will take the first steps towards building a Learning Agenda for Systems Change! Have questions? Need additional resources? Visit Section 3 and [www.publichealthlearningagenda.org](http://www.publichealthlearningagenda.org).

### Key Terms:

- A **Root Cause** is the fundamental reason for the occurrence of a problem.<sup>xxxix</sup> Root causes are underlying systems and structures of social injustice that generate health inequity over time, such as white supremacy, patriarchy, and class oppression. They interact with each other to produce social exclusion, marginalization and exploitation.<sup>xxx</sup>
- **Upstream** is working to address the social determinants of health (the conditions in which people are born, grow, live, work, and play).<sup>xxxi</sup>
- **Systems** are the organizations, policies, laws, and power structures that impact health.<sup>xxxii</sup>
- The **Current State** describes the challenge facing your community or organization.
- The **Future State** describes your community or organization's vision of where you would like to be if the challenge were addressed.
- The **Transition State** is the change process your community or organization will undergo through learning to move from the current to the future state. During this transition state, your community or organization will work on multiple iterations of the Learning Agenda. Each iteration will focus on a single time-bound desired state (see next definition).
- The **Time-bound Desired State** is the desired state for one iteration of a Learning Agenda, also known as the long-term outcome of the Learning Agenda logic model (see Phase 3).
- **Technical Challenges** are challenges in which there are known solutions or that can be solved by an expert. Although some solutions to technical challenges are simple and others more complicated, there is agreement on the solution and proven best practices to address it.
- **Adaptive Challenges** are those wicked problems of society – recurring complex social or cultural problems.<sup>xxxiii</sup> These challenges have no known solutions. They require learning and collaboration to solve; involvement of those closest to the problem; and changes in beliefs, values, and ultimately systems. Despite attempts to solve them in the past, these are the sticky challenges that persist.
- **People with lived experience** are those directly affected by social, health, public health, or other issues and by the strategies that aim to address those issues. Their lived experience gives them insights that can inform and improve systems, research, policies, practices, and programs. When we say lived experience, we mean knowledge based on someone's perspective, personal identities, and history, beyond their professional or educational experience.<sup>xxxiv</sup>
- **Social Determinants of Health** are the underlying community-wide social, economic and physical conditions in which people are born, grow, live, work, and age. They affect a wide range of health, functioning, and quality-of-life outcomes and risks. These determinants, and their unequal distribution according to social position, result in avoidable and unfair differences in health status between population groups.<sup>xxxv</sup>
- **Structural Determinants of Health** address the broader issues of climate, societal norms, macroeconomic social/health policies and systems of power. These determinants negatively

impact social determinants of health for people who have been historically marginalized and ultimately produce health inequities.

## Introduction

In Phase 1, your LASC team spent some time assessing your current level of readiness for systems change. You thoughtfully considered the status of your team’s relationships and engagement with the community and if other team members needed to be added to provide perspectives from those most impacted by community challenges. You made sure that you had leadership buy-in from your own organization and others involved in this work. If you hadn’t done so before, you identified a facilitator to help with the work ahead, established team norms, and built a shared understanding of some key concepts. Without a doubt, this was a lot of work, but it was necessary to build a foundation for the work ahead.

**TIP:** If your team jumped into Phase 2 without taking the Readiness Assessment in Phase 1, we strongly encourage you to take the time to complete that critical task. The assessment will help your team determine if you might need to build your collective capacity in terms of any of the Four Foundational LASC Principles of equity, leadership, systems thinking, or engagement.

Now, we begin to build a Learning Agenda by working through Phases 2-5 of the LASC Framework. While the LASC Framework appears sequential, the phases are not always linear; each phase or component may require revisiting the ones before it. Still, the LASC Framework can be seen as a road map for your learning journey. Teams will most likely need to work through these phases multiple times to build a comprehensive Learning Agenda. Through each iteration, teams – even those with limited experience with systems change – can begin to use more collective, transformative learning approaches to address systems change.

### *Why is Phase 2 important?*

Phase 2 helps your team collectively identify the current state within your community, and the root causes that have created the current state. It’s also where you will begin to consider all your community assets and envision an ideal future state or greater vision for your community, as well as the time-bound desired state of the first iteration of your Learning Agenda.

### *How can the Four Foundational LASC Principles help support Phase 2 work?*

- **Equity** drives your team towards a focus on the social, structural, and economic obstacles causing complex/adaptive community challenges and on their underlying root causes such as poverty or discrimination.
- **Leadership** ensures that power is shared, divergent thinking is encouraged, conflict is resolved, and that there is active contribution of the skills of all people at all levels to collectively inquire about the current state and to co-create a vision of a future state.
- **Systems Thinking** encourages your team to gain a deeper understanding of the challenge by going beyond what can be seen on the surface, to the systems and structures that are causing the challenges, and ultimately to the mindsets and culture that have created and sustained those systems and structures.
- **Engagement** ensures that a diverse group of interest holders, including those affected by the problem, help identify the challenge and aspired vision for the community, make collective

decisions, and dig deeper to uncover and address social, economic, and structural root causes of the challenge.

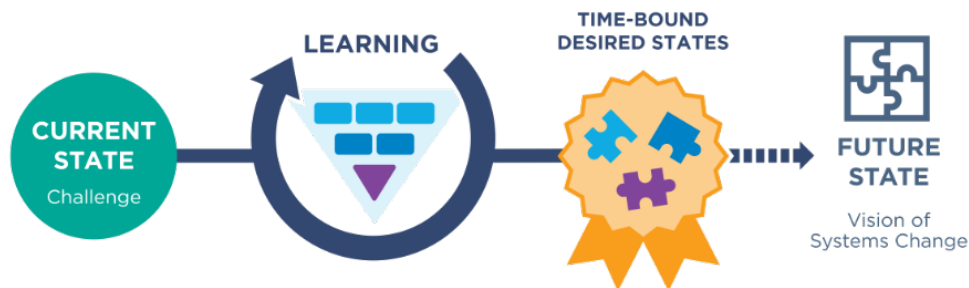
In Phase 2, you and your team will identify a community or organizational challenge impacting the health of your community and create an overarching vision for your Learning Agenda.

TIP: Throughout the LASC Framework and process, we've suggested focusing on challenges within a community and the root causes of those challenges. An alternative could be taking an asset-based approach by focusing on the opportunities within the community and the root causes of success. There can be value in both approaches.

For resources about asset-based approaches such as asset-based community development, appreciative inquiry, SOAR (strengths, opportunities, aspirations, results) assessments, and other related resources, see Section 3.

Another way of thinking about this is that your challenge (and the conditions in which it exists) is the current state and your vision – or your team’s desired outcome – is the future state. The transition state refers to the conditions that exist as your team works on the Learning Agenda and you move from the current state to the future state (see Figure 6.) During this time, your team is using learning to change one or more of the Six Conditions of Systems Change – represented by the inverted pyramid graphic introduced in Section 1 – and achieve a time-bound desired state. The future state (i.e., vision of systems change) is achieved through multiple iterations of the Learning Agenda.

Figure 6: The transition state between the current state (challenge) and future state (vision)



Phase 2 includes three steps:

1. Step 1: Identify community or organizational challenges
  - Step 1a: Gather existing health and equity assessment data
  - Step 1b: Structure a comprehensive approach to identify your challenge
  - Step 1c: Select an adaptive/complex community or organizational challenge on which to focus
  - Step 1d: Create a challenge and vision statement for the Learning Agenda for Systems Change
2. Step 2: Gain a deeper understanding of the selected challenge
  - Step 2a: Identify contributing factors and root causes using systems thinking approaches and tools
  - Step 2b: Build consensus to select a contributing factor on which to focus

- Step 2c: Dive deeper into the selected contributing factor using systems thinking approaches
3. Step 3: Write the challenge and time-bound desired state statements

Together, your team will explore the challenges affecting your organization or community and get curious about their causes. As you ask more questions, your team will gain a deeper understanding of the selected challenge by identifying contributing factors and root causes (i.e., sub-factors) of the challenge. You will determine which sub-factors are adaptive challenges and then will select one to address with the first iteration of the LASC process and develop a shared vision of success if that root cause is tackled (see Figure 7).

Figure 7: Challenge, Factor, Subfactor, and Type of Subfactors



### Step 1: Identify community or organizational challenges

Phase 2 begins with identifying a community or organizational challenge impacting the health of your community. These are the issues that affect the health of a population and have been collectively identified with a broad group of interest holders, including those affected by the problem.

It makes sense that your team may already have some idea of a specific community or organizational challenge that aligns with your organization's mission. This is the frame or perspective in which you started to design a Learning Agenda. This process, though, is designed to expand your thinking about the challenge – to reframe your perspectives. By gaining more information and insight from a variety of views – both within and outside your team – your team may collectively decide to address a broader, more complex challenge that still aligns with the mission of your organization.

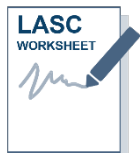
So, how does your team collectively identify a community or organizational challenge?

#### *Step 1a. Gather existing health and equity assessment data*

Start by gathering existing health and equity assessment data and information about the community to get a sense of its strengths, challenges, opportunities, and threats. This can include demographic data, health disparities data, economic indicators, and information about existing programs or initiatives. Gathering and reviewing multiple sources of data helps ensure that your team cross-verifies data and obtains a more holistic understanding of challenges.

A great place to start is with needs assessments such as Community Health Assessments (CHAs) or Community Health Needs Assessments (CHNAs) conducted by health departments or health care

systems. Needs assessments or issue reports from community-based organizations are also important resources. Most of these assessments can be found on the health department or organization's website. Check also with your state health department or Public Health Institute to identify any state-specific health inventories (e.g., Colorado Equity Compass, Utah Healthy Places Index). There are also national, and sometimes state, inventories such as County Health Rankings and Roadmaps, National Environmental Public Health Tracking Network, Social Vulnerability Index, and Community Commons that include county and community level. For a listing of these and other available data sources, see Section 3.



Document your thoughts in the Phase 2, Step 1a LASC worksheet in Section 3.

### *Step 1b. Structure a comprehensive approach to identify the challenge*

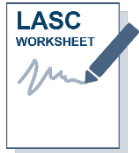
Once you have gathered existing data and begun to review it, ensure that your approach to identifying the challenge is comprehensive and includes different perspectives from within the community. If you recall in Phase 1, Step 1a, your team conducted an environmental scan for other individuals, groups, or partners who you believed shared an interest in your selected challenge. As you review your data, learn more about the community, and further explore the root causes of your challenge, consider if there are additional interest holders who might contribute to your efforts. There may be other community members and partners, from a variety of organizations and sectors, who are familiar with the community or systems in place and could help refine the challenge or root causes or implement portions of your Learning Agenda. Relationship mapping is one approach to visually identify relevant players in a network or system. For a link to this tool, see Section 3.

Even if other community members or partners are not added to your LASC team, ensure that you seek perspectives of other community members and partners as you identify your challenge. This might take the form of focus groups, key informant interviews, or town halls. The voices of community members with lived experiences should be emphasized – they can provide valuable insights and perspectives on the challenges that are being faced.

These conversations with community members with lived experiences and with additional partners working within the community help us build a clearer understanding of the current state. More importantly, these conversations help us understand the values and aspirations of both community members and partners. Here are some key questions to gather their perspectives:

- What would you say are the primary challenges facing the community? Does the community agree that is the primary challenge?
- Who is most impacted by the problem?
- How are they impacted?
- Why is this challenge occurring? What causes it? What keeps the problem in place?
- What policies, practices, rules, or regulations keep the challenge in place, or make the challenge worse?
- Who is causing the problem or who plays a role in keeping the challenge in place?
- What policies, practices, rules, or regulations are positively impacting the challenge?

- Who is currently involved in trying to address the problem?
- What assets exist in the community that should be considered when addressing the challenge?
- What outcome would the community find of value if the challenge were addressed?
- How would you define success? What would things look like if the challenge was addressed? What would be different?



Document the insight you receive in Phase 2, Step 1b of the LASC worksheet in Section 3.

Use the insight from others within the community to validate and critique the data you have gathered. Your team should consider:

- What data was collected and what might be missing? For example, are you missing data on some of the social determinants of health, such as access to health care or quality schools in the community?
- Who was included in the data that was collected and who might be missing? For example, are there subpopulations within your community that are not represented in the data, such as disabled veterans, migrant farmworkers, or transgender young adults?
- What biases (intentional or unintentional) might be present in your existing data and how it is presented?
- What historic and current structural systems and policies (e.g., redlining, investments in education, transportation) are in place? What role have these systems and policies played in creating and sustaining injustices that have led to the community challenge?
- Have systems or policies changed, and if yes, how have they changed?
- What information do you need to understand the role these systems and policies play in creating or sustaining injustices that have led to the community challenge?
- What patterns, if any, do you see among the contributors to this problem?
- Which contributors to the problem are connected and how are they connected?

After reviewing the existing data and considering the additional insight from community members and partners, collect any additional information that may be needed to understand the challenges more completely.

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*Remember to practice systems thinking as your team considers the data and insight from community members and partners. To address complex community challenges, we need to change mental models that have created existing structural and social systems. We need to see and think about situations differently than we do now and explore diverse perspectives on how the challenge is perceived and why it exists.*

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One tool that could help your team consider the current state is the 5 R's: Results, Roles, Relationships, Rules, and Resources. Thinking through these will help your team identify what they should listen for, where they should engage, what they should discover, and what interventions they may need to adapt.<sup>xxxvi</sup> The 5 R's Framework as well as other systems thinking tools can be found in Section 3.

If your agency is already using a tool or process for identifying community needs, such as Mobilizing for Action through Planning and Partnerships (MAPP), there is likely a lot of alignment with this step and

opportunities to leverage previous findings. For this resource and a list of other resources that can help facilitate the process of prioritizing and identifying root causes within a community, see Section 3.

*Step 1c. Select an adaptive/complex challenge on which to focus*

Through your work to date, your team has probably identified many strengths and challenges within your community. You have likely identified both technical and adaptive challenges. But remember, the goal of the LASC is to tackle the complex or adaptive challenges (which most public health challenges are) that require changes in mindsets, culture, and systems to improve. These are the issues below the tip of the iceberg, not just those observed at the surface.

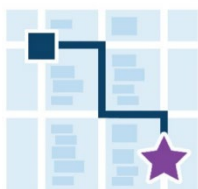
So, what exactly are adaptive challenges and how are they different from technical challenges? Figure 8 illustrates how challenges can vary across the technical to adaptive/complex spectrum.

Figure 8: Technical to adaptive/complex spectrum



**Technical challenges** have known solutions and/or can be solved by an expert. Although the complexity of technical challenges and their solutions may vary, there is typically agreement on the solutions and proven best practices to address a technical challenge. For example, a simple technical challenge might be that new staff are provided with an outdated set of department policies and procedures when hired. The solution would be to review the departmental policies and procedures annually to make necessary updates. An example of a more difficult technical challenge might be a clinic transitioning to a new electronic health record system. The transition would certainly be complicated, and you might need to hire an expert to help, but there is a known process and solution.

Figure 9: Technical challenge



On the other hand, adaptive challenges are those wicked problems of society – reoccurring complex social or cultural problems.<sup>xxxvii</sup> These challenges have no known solutions. Solving them requires learning and collaboration; involvement of those closest to the problem; and changes in beliefs, values, and ultimately systems. Despite attempts to solve them in the past, these are the sticky challenges that persist. Examples of adaptive or complex challenges are providing access to affordable quality housing or combatting poverty.

Figure 10: Adaptive challenge



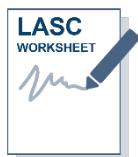
By working through the LASC, teams have the opportunity to change mindsets and culture to lead to systems change. An important first step, however, is to work on an adaptive or complex community or organizational challenge and the root causes driving the social and structural determinants of health.

Based on the readiness planning you did in Phase 1, we hope you have developed a collaborative team where leadership, power, and decisions are shared by all – especially those within the community most impacted by the challenge – and where authentic dialogue can take place. With the help of your team’s facilitator, you have agreed on a process that your team can use to collectively identify the challenge on which to focus your LASC.

Consider these points as you discuss which challenge to select:

- Does the data suggest this *is* an important challenge? Has this been confirmed by multiple people and partners within the community and from multiple perspectives?
- Is this challenge an adaptive or complex challenge that would require collaborative leadership, and systems thinking?
- Does this challenge allow an opportunity to impact the root causes of the challenge, to really move upstream to address social and structural determinants of health?
- Would addressing this challenge require your team and others in the community to identify deeply held beliefs and assumptions that have created the conditions leading to this challenge?
- Has this challenge been framed in a way that moves beyond a specific focus on a health issue to a broader focus on the systems and structures creating inequities?
- Could the challenge be affected through collective learning, along with other strategies?
- Would addressing this challenge be within your/your partners'/your collaborators' scope of influence and aligned with your respective missions?
- Would the solution to this challenge – the future state – be one that would be long-lasting and sustainable?

If you are new to this work or are at the Early Readiness level, you may not feel confident to work on a truly adaptive challenge at this point, or you may feel that your scope of influence is limited, and that is okay. The goal is that through each iteration of the LASC process, you are building those critical systems thinking skills, learning who else you need to engage to expand your scope of influence, and working on more and more adaptive challenges.



3. Document the issue you've chosen to focus on in Phase 2, Step 1c LASC worksheet in Section

*Step 1d. Create a challenge and vision statement for the Learning Agenda for Systems Change*

In Step 1d, you are moving from a more general issue like “uncontrolled Type 2 diabetes” to a more specific challenge that depicts the current state of your community. To help illustrate the LASC process, we will continue to build upon a challenge related to diabetes throughout Section 2. The full Diabetes Challenge Example worksheet can be found in Section 3.

Figure 11: Current state



Participants in the LASC Toolkit 1.0 pilot reported that writing the challenge statement is one of the hardest steps.

TIP: Here are some considerations for writing your team’s challenge statement:

- Frame your challenge so that it is clear that the impact is on your community. For example, “We are experiencing high rates of staff turnover” is a challenge, but how does this impact the community? What challenges would those staff be addressing?
- Be specific. For example, rather than “Our county ranks lowest for health outcomes,” be specific such as “Elderly adults in rural areas of South Georgia have elevated rates of morbidity including diabetes, coronary heart disease, and cancer.”
- Include only the challenge in the statement - no solutions yet! For example, rather than “Increase cultural humility among staff through education” - which is really both a vision and a solution – focus only on the challenge such as “Members of the Ethiopian community in Oakland, CA are not participating in preventive screenings.”

To help you craft your challenge statement, consider using the following phrasing:

*“The problem of [health outcome or issue] in [specify community or population] and results in [impact].”*

The challenge statement for our diabetes challenge example is:

*There are high rates of uncontrolled diabetes among Black and Brown individuals in ABC community. This results in missed days of work and preventable visits to the emergency room causing economic hardship and lower overall well-being for individuals with uncontrolled diabetes.*

Once you have identified the current state of your community and developed your challenge statement, you and your team will envision what it would look like if your community or organization’s challenge is addressed. One way to think about the vision is to take your challenge and flip it.

Figure 12: Future state



## FUTURE STATE

Vision of Systems Change

Remember, this is the overarching vision for your community or the future state of your community *after* you have developed and implemented a comprehensive Learning Agenda, likely consisting of multiple iterations of the LASC process. Refer to the diabetes challenge example in Section 3 for an example.



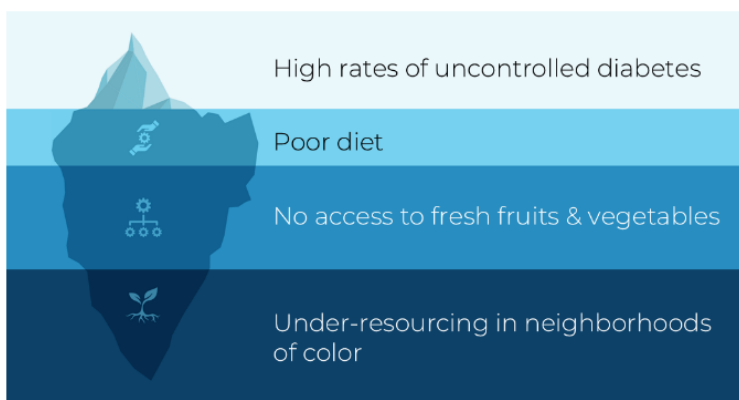
Document your LASC challenge statement (current state) and vision statement (future state) on Phase 2, Step 1d of the LASC worksheet in Section 3.

### Step 2: Gain a deeper understanding of the selected challenge

Now that your team has created a challenge statement and vision statement for a comprehensive Learning Agenda, it is time to define the challenge in a way that helps your team get to the underlying root or systemic causes. This process begins with thinking about the factors that contribute to the challenge you identified. Together your team should ask “What’s causing this challenge?” and “Why does this challenge persist?”

Most teams are eager to jump right in and begin work on the Learning Agenda, but this part of Phase 2 is incredibly important. Let’s think back to the iceberg model to understand why (see Figure 13).

Figure 13: Iceberg example



Refer to our diabetes challenge example. If the LASC team doesn’t dig deeper to uncover root causes of this challenge (what is under the surface of the water), you might only consider interventions to help individuals change their poor diet. Consider, though, what interventions you might try if the high rates of uncontrolled diabetes were caused by a lack of access to fresh fruits and vegetables or by stress? Or

further yet, were due to long-standing structures such as under-resourcing and racism that purposefully prevented land use for safe places to play and exercise, plentiful healthy jobs with paid sick leave and living wages, and tax incentives for access to healthy food?

Understanding the problem enables us to see opportunities differently. The key to this deeper understanding is to involve people who are from or live in the community and to consider together how to frame the challenge and what to do together to address the challenge. By doing this together, we hear different perspectives and ideas about how we can move forward toward a shared approach. Looking beyond the tip of the iceberg gets us to a deeper understanding of the problem – and enables us to see opportunities for lasting change systems change. Framing how we see the challenge is about systems thinking.

*Step 2a. Identify contributing factors and root causes using systems thinking approaches and tools*

It is important to spend time with community members and other interest holders to diagnose how you collectively perceive the challenge. Collectively defining the challenge and its root causes is key to articulating a shared vision so that you can work collaboratively to address it; identifying available resources, assets, and strengths that can be leveraged; and clarifying a shared understanding of the pathway of learning and skill set required to achieve the desired impact.

In Section 1, we learned that one of the concepts of systems thinking is understanding and reflecting on different perspectives regarding the challenge. Another concept is to understand the pieces of the whole system. So, what are the factors that cause or perpetuate this challenge? In this step, working with community members and other interest holders, you will list as many contributing factors as possible to your community challenge.

There are several systems thinking approaches and tools to help your team with this (a full list can be found in Section 3). One way to do this is to use the 5 Whys approach. Think about your challenge. Ask yourselves, why is this happening? Together, begin listing all the factors that you can think of that may be contributing to this challenge, but make sure they are grounded in facts or things that are actually happening. Think about the systems and structures that are at play. Ensure that everyone on your team, particularly those with lived experience as well as those working in different sectors, share their perspectives on why this might be happening.



Using our diabetes challenge example, we might ask “Why are there high rates of uncontrolled diabetes among Black and Brown individuals in ABC community?” Some factors might include:

- There is a lack of fresh fruits and vegetables in the community
- People with diabetes don’t know when to take their medication
- There is a lack of accessible and safe recreational parks and greenspaces to play and exercise
- It is not safe to walk outside due to crime and lack of sidewalks
- Poverty and economic inequities
- Chronic stress
- There is easy access to and promotion of fast-food dining options
- People with diabetes haven’t been diagnosed

Your team will likely come up with a list at least this long or longer of factors contributing to your community or organizational challenge, but your factors should be what is true for your community and identified by those across many perspectives.



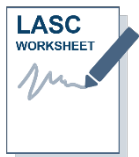
Document your team’s list of contributing factors in Phase 2, Step 2a of the LASC worksheet in Section 3.

*Step 2b. Build consensus to select a more adaptive contributing factor on which to focus*

Once your team has created a list of contributing factors, build consensus around a single adaptive contributing factor on which to focus, based on:

- The importance of the factor
- The partners engaged and working on this factor
- The alignment to LASC team members’ organizations’ missions
- The level of investment needed and assets available from multiple partners
- The opportunity for impact

Depending on the experience of your team, you may not feel confident in tackling one of the more or most adaptive factors such as poverty and economic inequities. Or you might need to first do more work engaging with the community and building trust. And if that is what your team decides, that is fine. Remember, through each iteration of the LASC, you are strengthening systems thinking skills, building relationships and trust, and learning from and with each other. You may be able to address a tougher contributing factor in the future.



Document the adaptive contributing factor on which to focus in Phase 2, Step 2b of the LASC worksheet in Section 3.

*Step 2c. Dive deeper into the selected contributing factor using systems thinking approaches*



When looking at your team’s selected contributing factor, it is very likely that that factor is still far from the root cause of the challenge. Instead, your factor may be one of several layers of contributing sub-factors that have created the challenge within your community – your team will need to dive deeper to get closer to the root cause. So, using the same approach as before, your team will consider your selected factor and ask yourselves, “why is this happening? Why is this contributing factor continuing to exist?” Continue using the 5

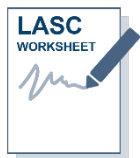
Whys exercise and begin listing all the sub-factors that may be contributing to this factor. Remember, make sure these sub-factors are actually happening, and consider the systems and structures at play. Most importantly, ensure that everyone on your team, particularly those with lived experience, share their perspectives on the root causes of the challenge.

Again, using our diabetes challenge example, let’s say our team has heard from the community that what is most important to them is to focus on the contributing factor that *there is a lack of accessible and safe recreational parks and greenspaces to play and exercise*. So, when we ask, “*Why is there a lack of accessible and safe recreational parks and greenspaces to play and exercise?*”, our list of sub-factors might have included:

- *The county hasn’t budgeted money for parks in this community*

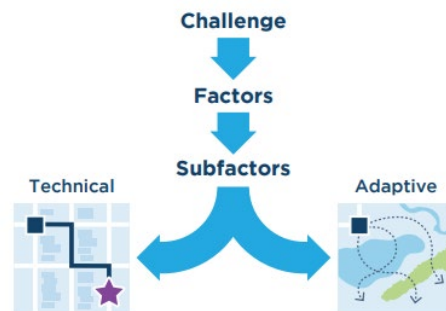
- *There is limited land available to develop into parks*
- *There is a lack of ADA-compliant infrastructure to accommodate people with limited mobility*
- *The facilities are in disrepair and in need of structural improvements*

Although you could continue asking *why* a few more times to drill further down into your sub-factor, you may be at a place where you have identified sub-factors that are root causes of your challenge (or get you closer to the root causes) and seem feasible and actionable as the focus of your LASC work.



Document your team’s list of sub-contributing factors in Phase 2, Step 2c of the LASC worksheet in Section 3.

Before your team selects a sub-factor on which to build their Learning Agenda, recall that even if you are new to this work, it is important to focus your efforts on adaptive challenges. So, pick one of the adaptive/complex ones on which to focus. Those sub-factors that are technical or more technical might be simple or complicated but have a known solution. On the other hand, those sub-factors that are adaptive/complex have no single known solution. Creating a solution requires learning and collaboration, involvement of those closest to the problem, and changes in beliefs, values, and ultimately systems.



Now, let’s go back to our diabetes challenge example. Perhaps from the list of sub-contributing factors our team has identified, we collectively decide that those that are more technical are:

- *There is a lack of ADA-compliant infrastructure to accommodate people with limited mobility*
- *The facilities are in disrepair and in need of structural improvements*

And the sub-factors that are more adaptive are:

- *The county hasn’t budgeted money for parks in this community*
- *There is limited land available to develop into parks*

Once your team has created the list of contributing sub-factors and sorted them into technical or adaptive/complex sub-factors, you will again select one of the adaptive/complex contributing sub-factors on which to focus. Again, you will consider the experience of your team, the importance of the factor to the community, the alignment to your organization’s mission, the investment needed, assets available from multiple partners, and the opportunity for impact.

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*Remember: It is critically important to the success and sustainability of this work to explore, encourage, and value different perspectives on the challenge and factors, including from interest holders working in other sectors and those from the community most impacted by the challenge.*

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As you did earlier in this phase, now that your team has selected a driving sub-factor to address, your team should revisit your list of interest holders. For example, if your team has decided to focus on an economic-related sub-factor, you will probably want to engage some economic development-focused groups in your work, because they will help you implement your Learning Agenda.



Continue on Phase 2, Step 2c of the LASC worksheet labeling each of your sub-factors as “technical” or “adaptive,” and selecting the one on which you’ll focus in Section 3.

### Step 3: Write the challenge and time-bound desired state statements

As you did when you created a challenge and vision statement for your Learning Agenda, your team will further refine your challenge statement to incorporate the sub-factor you just identified. You will then “flip” the sub-factor to create your time-bound desired state goal for your first iteration of the LASC process. Reflecting on the tips shared in the earlier part of Phase 2, create a challenge statement that is specific and includes only the contributing sub-factor you have selected to focus on (not the solution).

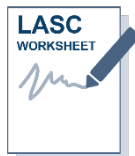
For example, “*The problem of [health outcome or issue] in [specify community or population] exists because [sub-factor/root cause] and results in [impact].*”

In our diabetes challenge example, we selected this adaptive/complex sub-factor: *The county hasn’t budgeted money for parks in this community.*

Our refined challenge statement is now: *There are high rates of uncontrolled diabetes among Black and Brown individuals in the community. This is due in part because there is a lack of accessible and safe recreational parks and greenspace to play and exercise because the county hasn’t budgeted money for parks in the community. This results in missed days of work and preventable visits to the emergency room causing economic hardship and lower overall well-being for individuals with uncontrolled diabetes.*

Once you have developed your sub-factor challenge statement, you and your team will envision what it would look like if your sub-factor challenge were to be addressed. Here’s the time-bound desired state for the first iteration of the diabetes challenge example: *The county has increased the funding over the next 10 years for recreational parks and greenspaces in this community to provide parity with other more well-resourced areas of the city.* The time-bound desired state represents a step toward achieving the future state vision you articulated in Phase 2, Step 1d. It will likely take multiple time-bound desired states (each working on a new contributing sub-factor or root cause) to achieve the ultimate vision of systems change.

Figure 14: Time-bound desired state



Document your challenge statement and time-bound desired state statement in Phase 2, Step 3 of the LASC worksheet in Section 3.

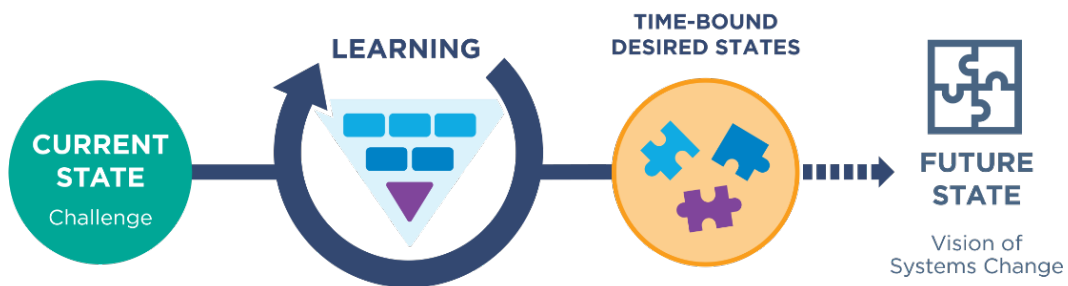
Now that you have completed Phase 2, you should have:

- An understanding of your current and future state
- An overarching challenge and vision statement
- A list of contributing factors
- A list of sub-contributing factors
- A refined challenge statement that includes a sub-factor/root cause
- A time-bound desired state for your first iteration of the LASC process

You can see a snapshot of these elements from the diabetes challenge example in the Diabetes Challenge Overview document found in Section 3.

We know this has been a lot of work. You were probably eager to start in on the *learning* part of the LASC process a while back but slowing down to really understand the factors that created the challenge within your community will set your team up for success moving forward. The learning part of the LASC process is up next in Phase 3!

Figure 15: Current, future, and time-bound desired states



### Team Reflection

What thoughts do you have about the challenge now? What new questions do you have about what is happening to cause this challenge? What assumptions did you and the team have going into this phase that may have changed along the way as you learned more about the community? Are there additional members that should be invited to the team to add support, expertise, or insight to your work?



Before moving onto Phase 3, reflect on which of your assumptions and the team’s assumptions were challenged during this process in Phase 2, Team Reflection in the LASC worksheet in Section 3.

### Phase 3: Design a Learning Plan

Welcome to Phase 3: Design a Learning Plan. As in previous phases, we will start by defining some key terms/concepts. Then it’s time to get started on your Learning Plan! Have questions? Need additional resources? Visit Section 3 and [www.publichealthlearningagenda.org](http://www.publichealthlearningagenda.org).

#### Key Terms:

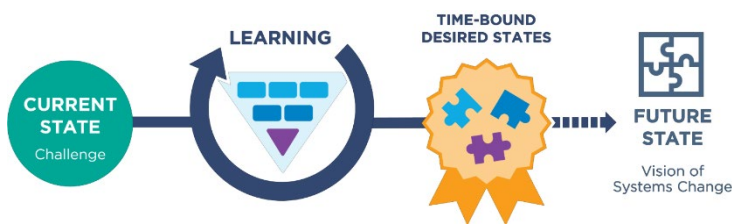
- A **Workforce Development Plan** is an assessment of the knowledge and skills of the current workforce linked to the anticipated knowledge and skills of the future workforce to best meet agency goals and objectives. These goals and objectives are often determined by a strategic plan which recommends changes to the way the workforce is recruited, hired, and retained (including how the current workforce will be replaced due to attrition). In short, a workforce development plan attempts to get the right people in the right job at the right time with the right knowledge and skills.<sup>xxxviii</sup>
- A **Logic Model**, for purposes of the LASC, shows the connection between learning required to achieve: short-term outcomes (changes in knowledge, skills, attitudes); mid-term outcomes (changes in conditions such as policy, practices, resource flows, relationships); and long-term outcomes (systems change indicators around the time-bound desired state, such as changes in culture).
- A **Learning Plan** is an outline of one or more learning opportunities and learning approaches needed to achieve the systems change identified in your time-bound desired state. The learning focuses on at least one root cause (contributing sub-factor) and will contain multiple learning opportunities focused on your short-term and mid-term outcomes. The Learning Plan is a collective document that addresses the learning needed for multiple audiences across multiple sectors and subsequently addressed by multiple partners.
- **Competency** is the integration and application of learned knowledge and skills in a contextually appropriate way. Someone who is competent in an area can use the body of knowledge and skills they have in that area to accomplish tasks and goals beyond an educational or training setting.<sup>xxxix</sup>
- A **Learning Opportunity** is an individual instance of learning/training for a particular audience, with intentionally designed length, dose, and interactions. Examples of learning opportunities might include a webinar for clinicians or a multi-year learning collaborative with clinicians, public health directors, and community leaders.
- **Learning Objectives** are brief statements describing the knowledge, skill, and attitude change that will result from a learning opportunity.
- **Bloom’s Taxonomy** is a framework for identifying and classifying learning objectives. It includes six levels of learning that progress from lower-order to higher-order thinking skills: remembering, understanding, applying, analyzing, evaluating, and creating. It is a tool for reflecting on the goals of a learning opportunity – for instance, recalling information (remembering) vs. using information in new situations (applying) vs. using information to create something new (creating).

- **Length and Dose** refer to the duration of a learning opportunity (e.g., 2 hours) and how often and over what period it occurs (e.g., once, or every week for 1 month). Typically, learning opportunities of longer length and dose are needed to achieve more complex learning objectives requiring higher-order thinking skills (e.g., analyzing, evaluating, creating).
- **Interaction (in learning/training)** refers to the interaction between the learner and the content to support engagement and achievement of the learning objectives. It can take the form of activities in a self-paced e-learning (e.g., match concepts to words), reflections (individually or with peers), instructor-led courses, or practice-based learning (working on a project with feedback from advisors/coaches or faculty).

## Introduction

In Phase 2, your team identified an issue on which to focus (current state) and did the hard work of identifying and naming the root causes of the challenge. You chose one of these adaptive sub-contributing factors to focus on and created a time-bound desired state statement envisioning a positive future state. This was a big step!

*Figure 15: Current, future, and time-bound desired states*



## Why is Phase 3 important?

The challenge and vision selected likely require changes in values or beliefs and demand new ways of thinking and acting. We know that change is difficult – it requires learning, other support and expertise, and motivation. A Learning Plan will allow you to specify what learning can help bring about the desired change.

Because complex challenges often require multiple layers of learning, it takes time to develop an effective Learning Plan. The team’s familiarity with learning design and their experience with the chosen community challenge will influence the time spent on Phase 3. LASC teams will benefit from setting expectations with team members and their supervisors about the time required to do this work well.

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*"Most people overestimate what they can do in one year and underestimate what they can do in ten years." — Bill Gates*

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## How can the four Foundational LASC Principles help support Phase 3 work?

- **Equity** drives your team towards a focus on the relational, structural, and economic conditions that need to change to achieve the time-bound desired state.

- **Leadership** supports the dedication of time and resources needed for this important, in-depth work. It exhibits change leadership principles of leading a group through transition and motivating individuals and teams toward a future state vision.
- **Systems Thinking**, as expressed in the Logic Model, encourages your team to be able to explain the interconnected Six Conditions of Systems Change (including those at the implicit level) that are the reason knowledge, skills, and attitudes must change to reach the time-bound desired state.
- **Engagement** ensures that the LASC team includes diverse partners from multiple sectors with expertise in planning, learning and design, and evaluation. The team includes individuals with deep understanding of the subject area, including those with lived experiences whose stories support and inform the Logic Model and Learning Plan.

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*A quick reminder: As with all phases of development of the LASC, skilled facilitation and deliberate inclusion of varied perspectives is important and will enhance your output.*

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Phase 3 includes three steps:

- Step 1: Create a Logic Model of learning required for change, including
  - Step 1a: Outline your Logic Model
  - Step 1b: Identify the conditions needed for systems change (mid-term outcomes)
  - Step 1c: Identify the changes in knowledge, skill, and attitudes needed (short-term outcomes)
- Step 2: Use your Logic Model to create a Learning Plan
  - Step 2a: For each change identified in Step 1c, identify competencies
  - Step 2b: For each change, prioritize audiences
  - Step 2c: For each change, draft learning objectives
  - Step 2d: For each change, identify learning conditions: length, dose, and interaction with content
  - Step 2e: For each change, suggest learning modality
- Step 3: Build and maintain relationships with potential collaborators

#### *LASC Learning Planning vs. Workforce Development Planning*

You may be asking yourself...how is a LASC Learning Plan different from a Workforce Development Plan? Let's take a moment to understand the differences and connections.

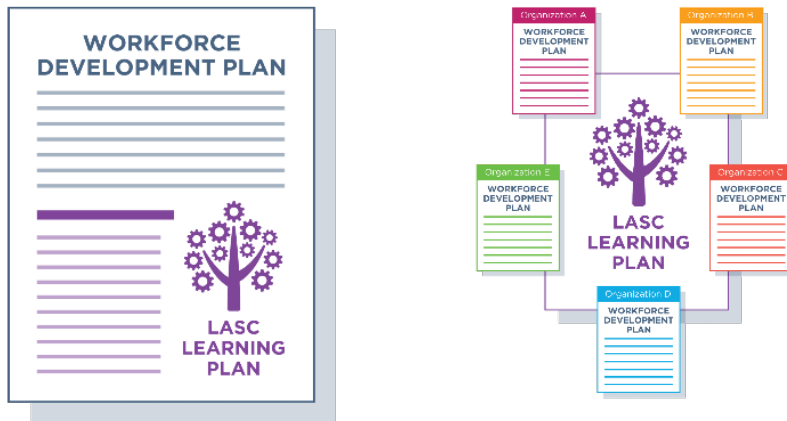
Workforce development planning is an important priority for public health agencies. There is an active, supportive training community focused on the topic, and many helpful competency frameworks are available (see Section 3). These frameworks are excellent guides to address specific positions or jobs in our organizations and their functions based on strategic plans or other organizational requirements, but they are different from LASC learning planning. LASC responds to community health or systems challenges and focuses on a collective and individual learning process.

Table 2: Workforce Development Plan vs. LASC Learning Plan

	Workforce Development Plan	LASC Learning Plan
Scope	<ul style="list-style-type: none"> <li>Organizational level</li> <li>Multiple components – including workforce assessment, recruitment, and retention efforts – in addition to training</li> </ul>	<ul style="list-style-type: none"> <li>Can be organizational or shared across multiple organizations and sectors</li> <li>Focuses specifically on training and learning to achieve future state/vision</li> </ul>
Audience	<ul style="list-style-type: none"> <li>Individuals within a single organization</li> </ul>	<ul style="list-style-type: none"> <li>Individuals across multiple organizations, sectors, and roles (e.g., legislators, community members, etc.)</li> </ul>
Type of Learning	<ul style="list-style-type: none"> <li>Focuses on individual competencies</li> </ul>	<ul style="list-style-type: none"> <li>Focuses on individual and collective competencies</li> </ul>
Focus of Learning	<p>Learning focuses on a variety of topic areas ranging from human resources and cyber-security policies; diversity, equity, and inclusion concepts; supervisory skills; specific software applications; or content specific to an area of focus (e.g., healthy aging or communicable disease)</p> <ul style="list-style-type: none"> <li>Focus is on specific positions or job functions</li> </ul>	<ul style="list-style-type: none"> <li>Learning focuses exclusively on the knowledge, skills, and attitudes needed to advance specific long-term systems change goals</li> <li>Focus is on community health or systems challenges and opportunities</li> </ul>

Now let’s explore how a Learning Agenda can support your organizational Workforce Development Plan (see Figure 16). If an agency is using the LASC process to address organizational culture shifts (such as from the Six Conditions of Systems Change) they would like to achieve to respond to community health or system challenges and opportunities, the resulting Learning Plan could be incorporated into the organization’s broader Workforce Development Plan. If a group of partners is completing the LASC process, components of the Learning Plan they develop collectively can be incorporated into each organization’s Workforce Development Plan.

Figure 16: How LASC Learning Plans can interact with Workforce Development Plans



Step 1: Create a Logic Model of learning required for change

TIP: The initial steps of Phase 3 (Create a Logic Model and Create a Learning Plan) are described sequentially here, but they usually iterate back and forth as the desired impact and assessment of the relationships between how learning is achieving potential outcomes (from continued learning on the community challenge) will influence each other.

*Step 1a: Outline your Logic Model*

To create the Logic Model, you will start with the time-bound desired state, then work backwards to identify:

- Which of the Six Conditions of Systems Change need to shift for your desired systems change to occur (see Section 1 for a description and Section 3 for more resources)
- The learning (or unlearning) required to bring about those changes (e.g., learning to create new or modify existing policies and practices or learning to shift power dynamics)

The time-bound desired state you agreed on in Phase 2 reflects the long-term outcome (systems change) towards which you are working. The changes to the Six Conditions of Systems Change are the mid-term outcomes, and the knowledge, skill, and attitude changes are the short-term outcomes. This process is most successful if you work *backwards* – starting with the systems change you wish to see, then identifying the learning necessary to change the conditions holding the challenge in place.

To identify the mid-term outcomes of your Logic Model for Change, consider each of the Six Conditions that need to shift to bring about systems change. To do so, reference the work you did in Phase 2, Step 2 to identify root causes and underlying factors that contribute to the current state challenge.

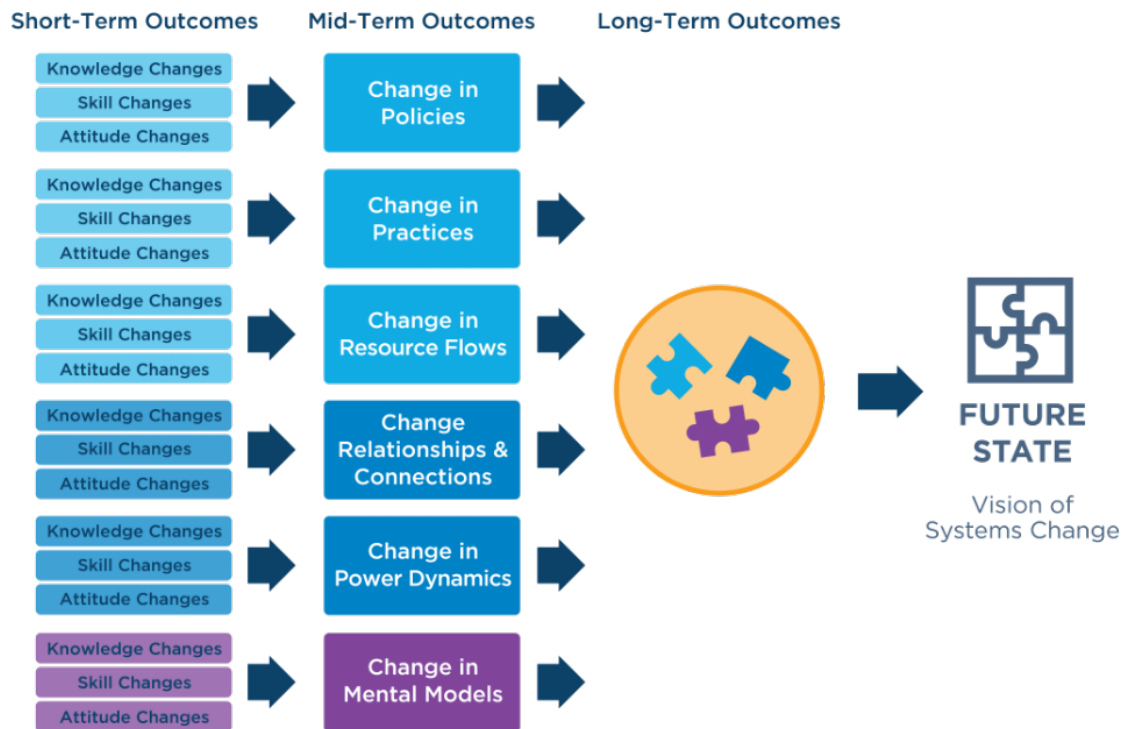
For each mid-term change you want to bring about, your team will explore what type of learning is needed, and by whom. Who needs to know what information? Whose attitudes on a topic need to shift? Who needs to have what skills? These become your short-term outcomes.

Table 3: Long-term, mid-term, and short-term components of your Logic Model for Change

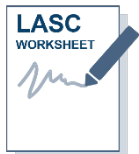
Short-Term Outcomes	Mid-Term Outcomes	Long-Term Outcomes <i>[This is the time-bound desired state your team created in Phase 2.]</i>
Changes in knowledge, skills, and attitudes <i>that impact the conditions holding the challenge in place</i>	Changes in the Six Conditions <i>that are holding your challenge in place</i>  <i>Including policies, practices, resource flows, relationships and connections, power dynamics, and mental models</i>	Changes to systems <i>that address your challenge</i>  <b>Tip: Start here and work backward to mid-term outcomes and short-term outcomes.</b>

Your final Logic Model will look something like this:

Figure 17: Your Logic Model for Change



TIP: Don't get overwhelmed! The Logic Model is a very methodical, stepwise approach. Remember, you already know your desired long-term outcome (the time-bound desired state you created in Phase 2).

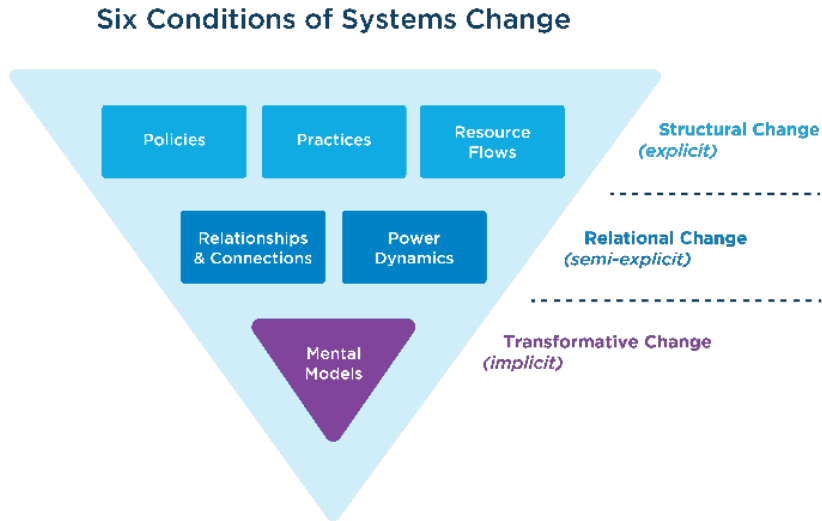


Document the time-bound desired state your team is seeking in the long-term outcome section of the Logic Model in Phase 3, Step 1a of the LASC worksheet in Section 3.

*Step 1b: Identify the Six Conditions needed for systems change – the mid-term outcomes*

When outlining mid-term outcomes, it's typically easiest for teams to identify the explicit or structural changes that are needed (i.e., policies, practices, and resource flows) (see Figure 2).

Figure 2: Six Conditions of Systems Change



Let's dive in, continuing with the diabetes challenge example and the time-bound desired state from Phase 2: *The county has increased funding over the next 10 years for recreational parks and greenspaces in this community to provide parity with other more well-resourced areas of the city.*

Based on this example, we ask:

1. What policies need to change to achieve the long-term time-bound desired state: What laws, policies, rules, or regulations currently stand in the way of (and need to be removed or modified)? What laws, policies, rules, or regulations could be initiated to support our time-bound desired state? Are there successful, relevant policy change models from other communities, or in our community related to other issues? See Section 3 for policy surveillance resources.

*For example: Through our conversations with other interest holders as part of Phase 2, we know that inadequate funding inhibits the creation of new parks and/or the repair and maintenance of existing ones. Therefore, one possible policy change is passing a tax that creates a new funding stream for the creation, renovation, and maintenance of greenspaces.*

2. What practices need to change to achieve the long-term time-bound desired state? For this category, you might consider enforcement practices, or practices that guide how your organization(s) does its work.

*For example: We know from exploration of the challenge in Phase 2 that the inequitable distribution of greenspace resources across the city is an important element of the problem that more funding alone may not address. One practical change would be to establish a Community Advisory Board that would make resource allocation recommendations for greenspaces. The Advisory Board would include representatives from all neighborhoods city-wide.*

3. How could resource flows change to help achieve the time-bound desired state and long-term vision? What resources (financial and human) currently exist to support greenspaces in the city? Where do funds come from and how are they used? What is the timeline and process? Are there inefficiencies or opportunities for improvement or innovation?

*For example: After talking to Parks and Recreation, you understand that greenspaces are currently developed exclusively on city-owned land. A possible resource flow change would be to allow businesses or nonprofits to apply to the city for funds to expand public-use greenspaces on land that they own.*

Your team will likely end up with multiple answers for policy, practice, and resource flow changes that could help to bring about the systems change you're seeking. That's what can happen when you create an environment that unleashes individual and collective creativity!

Now you will move on to those conditions that may be a little less easy to see – the semi-explicit ones. Keep in mind that the Six Conditions are interrelated. As you consider the next two questions, reflect on your previous responses. How do relationships or power dynamics play a role in the policy, practice, or resource flow changes you identified?

4. What changes to relationships or connections would help achieve your time-bound desired state? What groups are already working on this issue and are likely allies? What partnerships need to be created or strengthened? Where might relationships need to be repaired?

*For example: Your team knows that use of existing greenspaces is limited due to transportation access. Your team identifies one possible relationship change – to increase connectivity and collaboration between agencies providing transportation services, ensuring wider access to existing greenspaces.*

5. What changes to power dynamics would help achieve your time-bound desired state? Who currently holds power in the system? How can power be strengthened through organizing? Who has the power to make change?

*For example: As your team considers advocating for increased tax funding or a reallocation of funding for greenspaces, you recognize that a vocal, compelling collective voice is needed. To shift power dynamics to ensure that less-resourced neighborhoods have parity of greenspace resources with well-resourced neighborhoods, you will need a coalition of individuals, organizations, and businesses that can work and speak collectively to advocate for change.*

This brings your team to the process of exploring the implicit, transformative changes that will be needed in the mid-term to change the conditions of the system that hold your current problem in place. According to the Waters of Systems Change Model (see Section 1), changing mental models is an essential leverage point for reaching your desired systems change.<sup>x1</sup>

6. What change to mental models is needed to bring about your vision? What existing mental models prevent change from occurring? What beliefs or values led to our current ways of doing things?

*For example: From your conversations with interest holders, it is clear that many people hold the mental model that greenspace and recreation areas are a “nice to have” element. Shifting how parks are viewed - as a necessary component to a healthy community - and raising awareness about the current inequities that exist in access to greenspaces are both important changes to mental models.*



Use the Six Conditions of Systems Change to fill in the mid-term outcomes section of the Logic Model in Phase 3, Step 1b of the LASC worksheet in Section 3.

Your team is now well on its way to developing a deep and comprehensive Learning Plan!

TIP: Your team’s discussion of mid-term outcomes likely underscored the fact that systems change work crosses many sectors and requires engagement across many partners as you work toward a collective vision of change. No single organization can do this alone. As organizations work together to tackle a challenge, they learn together and contribute to each other’s learning - thereby amplifying the collective learning results.

The LASC process likely looks different for teams working at the statewide or national level compared to groups working on issues at the county or community level. At times, teams applying the LASC process at the local level have observed this multi-sector approach is quite intuitive and natural, given long-standing and established partnerships.

*Step 1c: Identify the needed changes in knowledge, skills, and attitudes – the short-term outcomes*

The next step in creating your Logic Model is to look at the short-term changes to knowledge, skills, and attitudes that we can achieve through learning that will then help us reach each of our mid-term outcomes. In this step, you will very intentionally consider audience – different audiences will need different types of information and skills to support the mid-term changes in conditions that you seek.

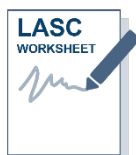
See below for a sample logic model using the mid-term outcome from the diabetes challenge example. For each example, short-term knowledge, skill, and attitude changes have been added. To fill out the short-term outcome column, your team will consider what people will need to know or be able to do to bring about the mid-term change in conditions, as well as consider what attitudes or individual mental models will need to be addressed. Just as with the mid-term outcome section above, you will likely identify many necessary changes to knowledge, skill, and attitudes.

Table 4: Logic Model from the diabetes challenge example

Short Term Outcome	Mid-Term Outcome	Long-Term Outcome
Change in Knowledge, Skills, Attitudes	Change in Conditions	Changes in System
<b>Knowledge Example:</b> Options for getting a tax passed (e.g.,	<b>Policy:</b> Pass a tax that creates a new funding stream for	The county has increased the funding over the next 10 years

<p>who passes it? Mill Levy vs. Property Tax vs. other options)</p> <p><b>Skill Example:</b> Advocate</p> <p><b>Attitude Example:</b> Creating/improving access to greenspace needs ongoing, consistent investment</p>	<p>greenspace creation, renovation, and maintenance</p>	<p>for recreational parks and greenspaces in this community to provide parity with other more well-resourced areas of the city.</p>
<p><b>Knowledge Example:</b> How current funding for greenspace works (e.g., where money comes from, who gets it, how it's used)</p> <p><b>Skill Example:</b> Using persuasive communication to talk about the importance of greenspace</p>	<p><b>Practice:</b> Community Advisory Board is established to create funding recommendations for greenspaces</p>	
<p><b>Knowledge Example:</b> How current funding for greenspace works (e.g., where money comes from, who gets it, how it's used)</p> <p><b>Skill Example:</b> How governments can partner with the private sector to support public resources (e.g., greenspaces)</p> <p><b>Attitude Example:</b> Benefit of a public/private partnership for greenspace funding</p>	<p><b>Resource Flows:</b> Change in funding mechanisms for greenspaces. Rather than funding only going through Parks and Recreation, businesses or nonprofits can apply for funds to expand greenspaces in land they own.</p>	
<p><b>Knowledge Example:</b> What transportation resources and support services are available</p> <p><b>Skill Example:</b> Cross-sector collaboration</p>	<p><b>Relationships &amp; Connections:</b> Increased connectivity and collaboration between agencies to provide transportation services, ensuring the community has better access to recreational parks and greenspaces</p>	
<p><b>Knowledge Example:</b> Current state of greenspaces throughout the city (e.g., where they are, where there are gaps, status of accessibility/disrepair)</p> <p><b>Skill Example:</b> Power building strategies</p> <p><b>Attitude Example:</b> Access to quality greenspace has positive</p>	<p><b>Power Dynamics:</b> Coalition of individuals, organizations, and businesses created to advocate for parity in greenspace creation/renovation across the city, ensuring less-resourced neighborhoods have parity with well-resourced neighborhoods</p>	

impact for community on improved health (resulting in lower medical costs, lost days of productivity, etc.), lower crime, family connectivity, etc.		
<b>Skill Example:</b> Persuasive communication	<b>Mental Models:</b> Perception that access to greenspace and recreation is a basic service deserved by everyone	
<b>Attitude Example:</b> Perception of access to greenspace as a matter of equal rights		



Fill in the knowledge, skill, and attitude changes your team is seeking in the short-term outcome section of the Logic Model in Phase 3, Step 1c of the LASC worksheet in Section 3.

### Step 2: Create a Learning Plan

[How to use your Logic Model to build a learning plan](#)

Guided by your Logic Model, your team will now develop a Learning Plan. To do this, your team will focus on the short-term outcomes from your Logic Model – the necessary changes to knowledge, skills, and attitudes.

The Learning Plan includes:

- The abilities needed to achieve the short-term outcomes (competencies)
- Audience (the individuals/groups who need the abilities and participates in the learning)
- Goals for the learning opportunities (learning objectives)
- The conditions needed for the audience to achieve competency (length, dose, interaction with content)
- The type of learning (modality)

In other words, your output for a Learning Plan will answer the questions:

- What abilities (Step 2a - competencies) are needed by whom (Step 2b – audience) in order to do what (Step 2c – learning objectives)?
- How will the learning take place (Step 2d – learning conditions and Step 2e – modality)?

Your team will work through each of these items in the next few pages to develop a multi-layered Learning Plan.

**TIP:** It may or may not feel possible for your Team to create a comprehensive Learning Plan that includes all the knowledge, skill, attitude changes you outlined in your Logic Model. To keep things manageable, consider starting your Learning Plan with the knowledge, skill, or attitude changes that your team feels may have the biggest impact.

Systems thinking research has shown that small inputs or actions in the right place at the right time may result in large changes.<sup>xlii</sup> Changes in simple rules, such as agreements or established norms in human systems, can result in complex behavior change. (See Section 3 for resources about identifying leverage points).

To identify initial knowledge, skill, or attitude changes for your Learning Plan, ask yourselves: *What small change might be the difference that will make the biggest impact on our time-bound desired state?*

An excerpt of the Learning Plan for the diabetes challenge example might look like Table 5 below.

Table 5: Excerpt of the Learning Plan from the diabetes challenge example

2a: Competencies	2b: Audience	2c: Learning Objectives	2d: Learning Conditions (Length, Dose, Interaction with Content)	2e: Modality	Short-Term Outcome	Mid-Term Outcome
Identify opportunities to influence policies... external to the organization	Coalition partners	List the options for getting a tax passed	<p><b>Length:</b> Short</p> <p><b>Dose:</b> Once, with ability to revisit</p> <p><b>Interaction:</b> Individual, with opportunity to ask questions</p>	Video, Webinar, or Presentation	<b>Have Knowledge About:</b> Options for getting a tax passed (e.g., who passes it? Mill Levy vs. Property Tax vs. other options)	<b>Policy:</b> Pass a tax that creates a new funding stream for greenspace creation/renovation/maintenance.

*Step 2a: For each change, identify competencies*

Starting with competencies allows your team to consider what abilities are needed to achieve the short-term outcome. For this step, it is helpful to use an established set of competencies (see Section 3 for resources).

In the diabetes challenge example, one of your team’s short-term outcomes is that people need to know what the options are for getting a tax passed before they can achieve the mid-term objective of passing a tax. So, what do people need to be capable of to achieve the short-term outcome? Using the Core Competencies for Public Health Professionals, the LASC team identifies Domain 2: Policy Development and Program Planning Skills as important. Specifically, competencies in the areas of:

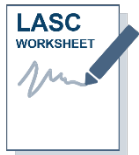
- 2.1: Develops policies, programs, and services
- 2.2: Implements policies, programs, and services
- 2.5: Influences policies, programs, and services external to the organization

Let’s say your team identified the following specific competencies needed to achieve the short-term outcome in the chart below.

Table 6: Example Core Competencies associated with a short-term outcome

Competencies needed to achieve short-term outcome	Audience	Learning Objectives	Learning Conditions	Modality	Short-Term Outcome
---	----------	---------------------	---------------------	----------	--------------------

2.1.2: Assesses the feasibility and implications of policies					<b>Have Knowledge About:</b> Options for getting a tax passed (e.g., who passes it? Mill Levy vs. Property Tax vs.other options)
2.2.1: Identifies individuals and organizations who can contribute to implementation of policies					
2.5.1: Identifies opportunities to influence policies...external to the organization					
2.5.2: Determines priorities for influencing policies					



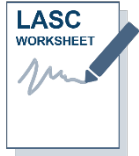
Identify the competencies needed to achieve each of your short-term outcomes and add them to the first column of the Learning Plan in Phase 3, Step 2a of the LASC worksheet in Section 3.

*Step 2b: For each change, prioritize audiences*

Now we consider who needs to be competent in each of the areas listed above. In the diabetes challenge example, we anticipate two primary audiences: our coalition members who will need to prioritize their advocacy efforts, and the Parks and Recreation department which will need to understand what role they can (or can't) play in the policy process. We expand our Learning Plan to add the audience(s).

Table 7: Example audience(s) associated with a short-term outcome

Competencies	Audience(s) that need these competencies	Learning Objectives	Learning Conditions	Modality	Short-Term Outcome
2.1.2: Assesses the feasibility and implications of policies	Coalition partners				<b>Have Knowledge About:</b> Options for getting a tax passed (e.g., who passes it? Mill Levy vs. Property Tax vs.other options)
2.2.1: Identifies individuals and organizations who can contribute to implementation of policies	Coalition partners				
	Parks and Recreation				
2.5.1: Identifies opportunities to influence policies... external to the organization	Coalition partners				
2.5.2: Determines priorities for influencing policies	Coalition partners				



Continue your Learning Plan by adding the audiences to column two in Phase 3, Step 2b of the LASC worksheet in Section 3.

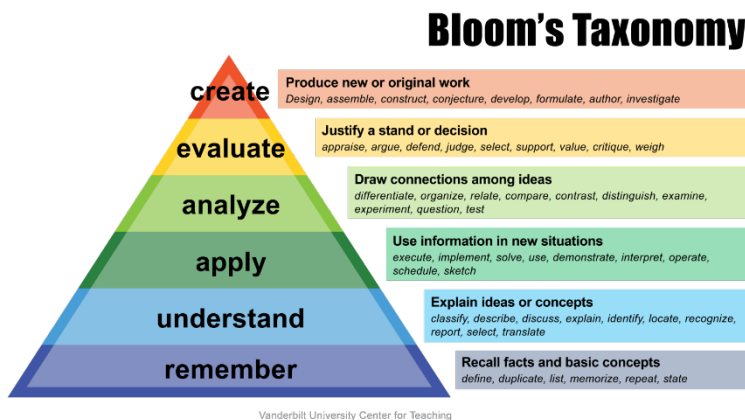
*Step 2c: For each change, draft learning objectives*

The learning objectives define the outcomes of individual learning opportunities. After participating in the learning...

- What should the audience know and how do we communicate it?
- What should the audience be able to do?
- How should the audience’s attitude or beliefs change and what messages or training would resonate best with this audience in a way that might help change their mental models?

Bloom’s Taxonomy provides a framework for writing measurable learning objectives.

Figure 18: Bloom’s Taxonomy



Sometimes, we want our audience to know information, facts, or established best practices. In that case, a subject matter expert has information that we want the learner to retain in such a way that they can remember it. Or, perhaps we want our audience to understand the information in such a way that they can explain it to others or identify situations where it is applicable. Sometimes it’s important that learners be able to apply that information in scenarios they may encounter – or use the information to analyze a situation and draw conclusions. Or maybe we want learners to be able to develop and create something. Being clear about the outcome we want for learners helps us write clear objectives for the learning and design it in such a way that our goals can be achieved.

In the diabetes challenge example, you’ll see that we may have different learning goals for different audiences based on what information we anticipate they may already have, and what we want them to be able to do following the learning. In the diabetes challenge example, we want coalition members to be able to:

- Identify existing opportunities for passing a tax
- Assess the feasibility of each of those options
- Determine where to focus their advocacy efforts, based on that information

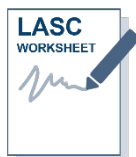
What is required in this case is a combination of lower-level knowledge skills, combined with higher-level analytical skills.

For an audience like the Parks and Recreation Department, the situation is nuanced. Though they may be a partner in the coalition, they also need to understand their role as a city agency, depending on the tax option the coalition decides to pursue. They may be restricted in their ability to influence which avenue of tax increase the coalition pursues.

Our Learning Plan now looks like Table 8, below.

Table 8: Learning objectives associated with a short-term outcome from the diabetes challenge example

Competencies	Audience(s)	Learning Objectives – outcomes of the learning opportunities that would help the audience gain competency	Learning Conditions	Modality	Short-Term Outcome
2.1.2: Assesses the feasibility and implications of policies	Coalition partners	Distinguish the pros and cons of different tax options			<b>Have Knowledge About:</b> Options for getting a tax passed (e.g., who passes it? Mill Levy vs. Property Tax vs. other options)
2.2.1: Identifies individuals and organizations who can contribute to implementation of policies	Coalition partners	Describe the role different types of organizations can play in tax initiatives			
	Parks and Recreation	Describe the role the Parks and Recreation Department can play in tax initiatives			
2.5.1: Identifies opportunities to influence policies... external to the organization	Coalition partners	List the options for getting a tax passed			
2.5.2: Determines priorities for influencing policies	Coalition partners	Recommend the tax option that makes the most sense to pursue			



Add the learning objectives you want to achieve for each audience to the third column of the Learning Plan in Phase 3, Step 2c of the LASC worksheet in Section 3.

*Step 2d: For each change, identify learning conditions: length, dose, and interaction with content*

Based on the learning objectives we just identified, we now consider the content.

- How much content needs to be delivered?
- How much of the content is new content?
- How complex or nuanced is the content?

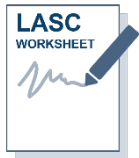
Answers to questions such as these help us determine how long and how much training might be needed. Can the learning goal be reached through a one-hour session held one time? Or is there a lot of new content that needs to be delivered in short sessions across a one-month period of time?

- What do learners need to be able to do with the content (remember it, apply it, use it to develop something new)?
- How will learners need to engage with the content in order to achieve the learning goal?

To achieve the objective of learners remembering facts, a knowledge check may be sufficient. If learners need to be able to apply information or skills in different situations, you’ll need to provide an opportunity for them to practice and get feedback. For learners to be able to develop new things, being able to learn and discuss with peer learners will be critical. Table 9 below continues the Learning Plan excerpt for the diabetes challenge example.

Table 9: Example learning conditions associated with a short-term outcome from the diabetes challenge example

Competencies	Audience(s)	Learning Objectives	Learning Conditions that are needed to achieve the learning objectives	Modality	Short-Term Outcome
2.1.2: Assesses the feasibility and implications of policies	Coalition partners	Distinguish the pros and cons of different tax options	<b>Length:</b> Medium <b>Dose:</b> Multiple discussion sessions <b>Interaction:</b> Collective, with opportunity to discuss		<b>Have Knowledge About:</b> Options for getting a tax passed (e.g., who passes it? Mill Levy vs. Property Tax vs. other options)
2.2.1: Identifies individuals and organizations who can contribute to implementation of policies	Coalition partners	Describe the role different types of organizations can play in tax initiatives	<b>Length:</b> Short <b>Dose:</b> Once, with opportunity to revisit <b>Interaction:</b> Collective, with opportunity to ask questions		
	Parks and Recreation	Describe the role the Parks and Recreation Department can play in tax initiatives	<b>Length:</b> Short <b>Dose:</b> Once, with opportunity to revisit <b>Interaction:</b> Individual, with opportunity to ask questions		
2.5.1: Identifies opportunities to influence policies... external to the organization	Coalition partners	List the options for getting a tax passed	<b>Length:</b> Short <b>Dose:</b> Once, with ability to revisit <b>Interaction:</b> Individual, with opportunity to ask questions		
2.5.2: Determines priorities for influencing policies	Coalition partners	Recommend the tax option that makes the most sense to pursue	<b>Length:</b> Medium <b>Dose:</b> Multiple discussion sessions <b>Interaction:</b> Collective, with opportunity to discuss/ debate		



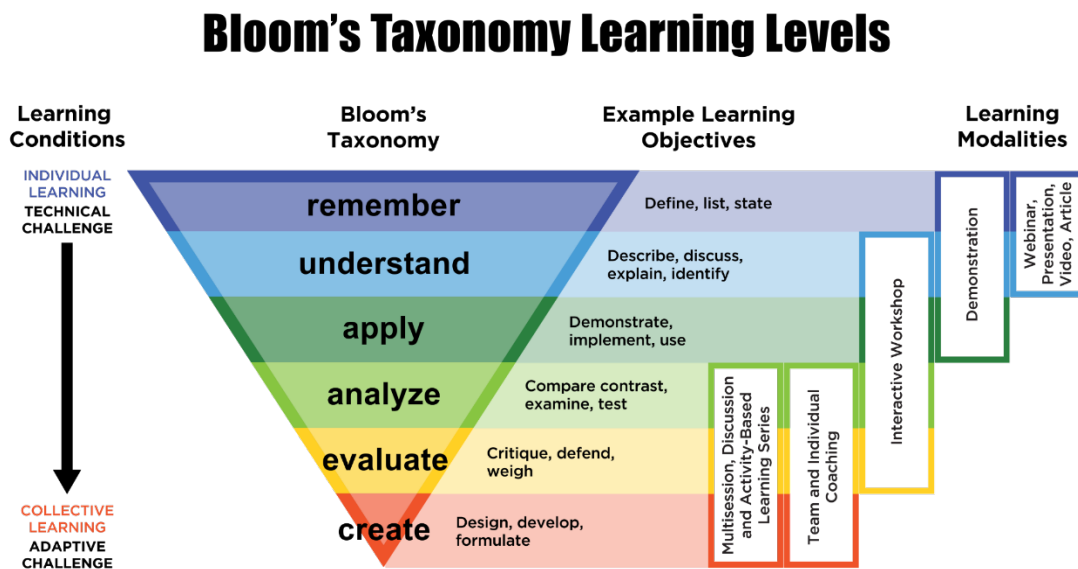
Add the learning conditions to the fourth column of the Learning Plan in Phase 3, Step 2d of the LASC worksheet in Section 3.

**Step 2e: For each change, suggest a learning modality**

What type of training (e.g., webinar, meeting, presentation, simulation, video, etc.) will be appropriate for each audience, given the learning objectives and the conditions needed to achieve those objectives? Consider reaching out to your Regional Public Health Training Center or other training partners for support with this step.

Figure 19 below may be helpful as you consider what training modalities might best achieve different levels of learning goals. For example, a webinar or self-paced module may be well-suited to help learners memorize and be able to restate new content. If you want learners to be able to describe concepts to others or apply or analyze the information, you will need some form of bidirectional exchange of information. This could be achieved through an assignment completed by individual learners and sent to an instructor for review, or through group discussion or practice exercise completed in a workshop. For learners to be able to formulate new strategies or develop new approaches, they will very likely need to be in a learning situation where they are working collectively, and over an extended period. In these situations, there is less “learning from an expert” and more “co-creation of learning” from within the learning group. Learning environments like Action Institutes or Learning Collaboratives are a better fit for these learning needs.

Figure 19: Learning modalities supporting increasing impact

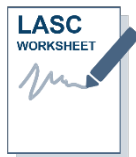


To achieve transformative learning for systems change, we must engage in knowledge, skill and attitude changes both individually and collectively. The flipped Bloom's Taxonomy framework in the image above clearly demonstrates the learning needed to address technical versus adaptive challenges. For example, multi-session and activity-based trainings encourage learners to apply, analyze, evaluate, and create together – fostering collective learning. In contrast, webinars help learners interact with the content to remember, understand, and reflect individually. Both types of transformative learning are crucial for shifting mental models towards our long-term vision.

As the Learning Plan from our diabetes challenge example in Table 10 below demonstrates, different types of learning modalities will be needed for different audiences, learning goals, and conditions. See the diabetes challenge example in Section 3 for more detail.

Table 10: Excerpt of learning opportunities associated with a short-term outcome from the diabetes challenge example

<b>2a: Competencies needed to achieve short-term outcome</b>	<b>2b: Audience(s) that need these competencies</b>	<b>2c: Learning Objectives - outcomes of the learning opportunities that would help the audience gain competency</b>	<b>2d: Learning Conditions that are needed to achieve the learning objectives</b>	<b>2e: Learning Modality that will provide the learning conditions to achieve the learning objective</b>	<b>Short-Term Outcome</b>
2.5.1: Identifies opportunities to influence policies...external to the organization	Coalition partners and interest holders who share common goal	List the options for getting a tax passed	<b>Length:</b> Short <b>Dose:</b> Once, with ability to revisit <b>Interaction:</b> Individual, with opportunity to ask questions	Webinar	<b>Knowledge:</b> Options for getting a tax passed (e.g., who passes it? Mill Levy vs. Property Tax vs other options)
2.5.2: Determines priorities for influencing policies	Coalition partners	Recommend the tax option that makes the most sense to pursue	<b>Length:</b> Medium <b>Dose:</b> Multiple discussion sessions <b>Interaction:</b> Collective, with opportunity to discuss/ debate	Series of facilitated discussions during coalition meetings	



Add learning modalities that would meet the learning objectives and learning conditions to the fifth column of the Learning Plan in Phase 3, Step 2e of the LASC worksheet in Section 3. You will repeat this planning process for each of the short-term outcomes you identified in your Logic Model.

### Step 3. Build and maintain relationships with potential collaborators

Now that you have drafted your Learning Plan, it’s time to consider who you will work with to implement the plan. Collaborators could include organizations or individuals who:

- Can help develop or host learning opportunities
- Have the content expertise needed for the learning opportunity
- Are connected to the intended audience for the learning opportunity

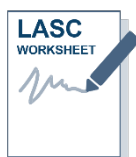
In Phase 1, you completed an environmental scan for interest holders and have been adding to that list as you gained a deeper understanding of the challenge in Phase 2. Refer back to that list on your LASC worksheet from Section 3 and identify which parties could play one or more of the key collaboration roles listed above.

What is your current relationship with these groups or individuals? Where might you need to strengthen connections? Who from the LASC team will support that effort? Table 11 below is an example of how the LASC team might reflect on their existing relationships with identified potential collaborators and

determine next steps. The team can now plan outreach to each potential collaborator and discuss it with leadership to support relationship building.

Table 11: Outreach plan to explore support for learning opportunities from diabetes challenge example

Individual, Group, or Organization	Existing Relationship with LASC Team	Next step
Health department	<b>Strong.</b> Debbie is part of the LASC team.	Determine which learning opportunities they can help with and get them scheduled.
State Policy Institute	<b>Moderate.</b> State health department diabetes program staff have worked with them in the past.	Our team member, Debbie, will reach out to set an agenda for a planning meeting.
Local Government Commission	<b>Weak.</b> Would be good to have a relationship at some point as the group has access to influential policy makers and legislators	Our team member, Crista, will ask for a meeting to begin relationship-building. Crista will ask for a volunteer from the coalition to help prepare a background document to share and hopefully attend the meeting as well.



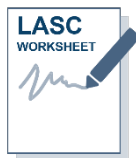
Collect ideas for a potential collaborators who can support learning opportunities in Phase 3, Step 3 of the LASC worksheet in Section 3.

The LASC is an iterative process, and you might not be able to engage all possible collaborators in your first cycle due to resource or time limitations or even due to their level of interest. Ideally, the collaborators most closely involved with the issue at hand will have been engaged in the earlier Phases to help define the challenge. In Phase 3, consider which potential new collaborators need to be involved to most successfully address your time-bound desired state (based on their relationship to the issue and their strengths). It may be that others will continue to become engaged in future iterations of your LASC work. Once you have the partners you need on board for this version of your Learning Plan, you can move forward with learning opportunity planning in Phase 4.

In Phase 4, you will consider who can handle which parts of the Learning Plan, and the timeline and logistics of implementation and evaluation.

### Team Reflection

Would you have reached that set of learning opportunities in your Learning Plan if you had not gone through the in-depth process of defining the challenge? Would your audiences have had the same breadth if you had not gone through the development of your Logic Model? Do you feel confident that the proposed learning will begin to lead to some changes over time? Do you feel that you can share your Logic Model with others? Can it serve as a tool to connect other work that you and other team members are working on (i.e., specific project workplans or agency workforce development plans)?



Before moving onto Phase 4, reflect on the Logic Model and the proposed learning opportunities at a high level. You can record your reflections on Phase 3, Team Reflection on the LASC worksheet in Section 3.

## Phase 4: Implement & Evaluate

Welcome to Phase 4: Implement & Evaluate. As in previous phases, we will start by defining some key terms/concepts. Then it's time to operationalize your Learning Plan! This Phase focuses on important implementation concepts and moves onto approaches to evaluation your first Learning Plan. Have questions? Need additional resources? Visit Section 3 and [www.publichealthlearningagenda.org](http://www.publichealthlearningagenda.org).

### Key Terms:

- **Systems Change Leadership** key concepts include understanding change as a process, inspiring others toward a time-bound desired state, clarifying roles and responsibilities in the change process, and communicating expectations.
- An **Implementation Plan** “is a planning tool used to document key aspects guiding a change effort, including implementation goals, strategies used, person(s) responsible, and timeline”.<sup>xliii</sup> For the purposes of operationalizing your Learning Plan, your Implementation Plan should document your strategies for collaboration, resources, project management, and communications.
  - A **Collaboration Plan** articulates roles and responsibilities for all organizations involved in implementing a Learning Plan or a specific learning opportunity.
  - A **Resource Plan** identifies the human and financial resources available and/or needed to implement a Learning Plan and its multiple learning opportunities. A resource plan includes a budget and may include pursuing additional funds if needed.
  - A **Project Management Plan** tracks the logistics for each learning opportunity within a Learning Plan. This includes identifying planning committees, timelines, content development, and other logistics.
  - A **Communications Plan** documents what you will do to promote each learning opportunity to recruit your intended audience.
- An **Evaluation Plan** outlines how you and your collaborators are defining success for your Learning Plan and how you will measure it.<sup>xliii,xliv</sup>
  - **Process evaluation** documents the activities that took place, examines whether they were implemented as planned, and identifies opportunities for quality improvement.
  - **Outcome evaluation** focuses on the effectiveness of activities in meeting their intended objectives.

### Introduction

In Phase 3, you created your Logic Model and identified short-term and mid-term outcomes in support of long-term systems change. You developed your Learning Plan to address the challenge, contributing sub-factor, and time-bound desired state that you defined in Phase 2.

In Phase 4, Implement & Evaluate, your LASC team will consider the importance of systems change leadership in implementing your Learning Plan. You will focus on the logistics of operationalizing your Learning Plan and evaluating processes and outcomes. As you move forward, it may also be helpful to revisit your team readiness and plans for implementation and evaluation from Phase 1.

### *Why is Phase 4 important?*

Phase 4 is where all your collective planning efforts are put into action. There are a couple of things to consider as you implement and evaluate your multi-layered Learning Plan. First, it's important to cultivate the learning culture needed to foster systems change (e.g., celebrating small wins and adjusting for quality improvement). You may also find yourself tapping into your project management and change leadership skills to address challenges that arise during implementation. Over time, you can begin to assess how all of your efforts are influencing the Six Conditions of Systems Change.

### *How can the four Foundational LASC Principles help support Phase 4 work?*

- **Equity** is prioritized as you consider adding collaborators, determine how resources are leveraged between partners, and make choices regarding instructional design (e.g., diversity of subject matter experts and accessibility).
- **Systems Thinking** pushes you to evaluate how your learning opportunities and Learning Plan are affecting the Six Conditions of Systems Change through intended mid-term and long-term outcomes.
- **Engaging** community and partners during the design and implementation of learning opportunities supports collective learning. When defining your Evaluation Plan, it's important to consider engagement metrics to ensure assessment of meaningful outcomes.
- **Leadership** must foster a learning culture and leverage system change skills to maintain buy-in from all those involved. Leadership must also ensure a shared understanding of the future state; create structures that support implementation in ways that reduce change resistance and foster positive, organized, and focused actions forward; and align/integrate the Learning Plan with existing plans and processes.

Phase 4 includes four steps:

- Step 1: Leverage change leadership skills toward the time-bound desired state
- Step 2: Develop an Implementation Plan
  - Step 2a. Identify learning opportunity partners in a Collaboration Plan
  - Step 2b. Determine budget in a Resource Plan
  - Step 2c. Develop specific learning opportunities in a Project Management Plan
  - Step 2d. Engage participants through a Communications Plan
- Step 3: Develop an Evaluation plan
  - Step 3a. Evaluate Individual learning opportunities
  - Step 3b. Evaluate the Comprehensive Learning Plan
- Step 4: Implement and evaluate your learning opportunities & Learning Plan
  - Step 4a. Disseminate Evaluation Findings

### *Step 1: Leverage change leadership skills toward the time-bound desired state*

Moving into LASC implementation means that you are ready to catalyze systems change through transformative learning. Your Learning Plan and learning opportunities likely represent a shift in the way you and your teams, organization, and/or community partners approach public health challenges. Achieving your time-bound desired state will require new content for knowledge and skill building, and may drive new approaches to planning for, organizing, and leading the work to support individual and collective action.

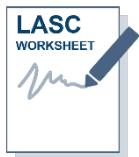
Systems change is about new ways of thinking and behaving; both are likely to require leadership support. It's important to consider a few key systems change leadership concepts before you begin implementation and evaluation.

1. Understand change as a process, your team's potential responses to change, and how to improve resilience. Change challenges all of us, requiring shifts in our ways of thinking and behaving. Many systems change initiatives are unsuccessful largely because we have not planned for our own resistance to the change and/or inability to implement change. Challenges might include: a lack of resources (funding or staff and partners); lack of clarity and understanding regarding the change itself and the definition of "future state;" lack of buy-in to the requirement or motivation for change; or lack of clear roles and responsibilities for change. Throughout this process, the goal is to manage change in ways that align with our collective expectations and capacity. We also want to build resilience – to expand our ability to learn, adapt, and be flexible during change.
2. Clarify the *why* behind the change and ensure there is a clear, inspirational, focused future state that all team members understand. One way to increase resilience to change is to inspire people toward the time-bound desired state. Most people are motivated to change their thinking and behavior when they believe change is possible and when they are clear on how they can contribute to the process. Clear communication of a desired state that is imaginable, desirable, flexible, feasible, and focused can inspire and motivate our teams to take the next first step.<sup>xlv</sup> In your first LASC cycle, your time-bound desired state should be co-created with these concepts in mind. In addition, your desired state should pass the "champagne test." A phrase developed by Heath and Heath<sup>xlvi</sup>, this refers to a time when all team members can celebrate that the desired state was accomplished.
3. Clarify roles and responsibilities in the change process. When there are clear roles and responsibilities, team members better understand how they can contribute. Creating an Implementation Plan is one way to help predict and clarify what roles and responsibilities, deadlines, and resources might be needed before making the change. In addition, it is important to clarify who makes the decisions about and during the change; who is responsible for the change itself; who is being impacted by the change; and others who want the change to occur. Examples of these roles include:
  - Sponsor: Individual or group who has the organizational power to legitimize the change
  - Change Agent: Individual or group responsible for implementing the change
  - Target: Individual or group being impacted by the change
  - Advocate: Individual or group who wants the change to occur and does not have the organizational power to legitimize it

When defining roles and responsibilities, take the opportunity to consider each contributor's strengths and assets. This might also be a time for an individual or organization to practice taking on a different role in the process to build new strengths.

4. Communicate and communicate again. Many of us are inundated with information in multiple ways and on multiple levels. We may receive hundreds of messages throughout the day. It is important to have a plan to communicate what is expected and why, in ways that resonate with

the communication style of your target population and include clear and motivational approaches to achieve the time-bound desired state.



Document your reflections in Phase 4, Step 1 of the LASC worksheet in Section 3.

### Step 2: Develop an Implementation Plan

Refer to your readiness assessment — specifically your readiness for implementation and evaluation — from Phase 1, Step 1. Your LASC team will now build upon that readiness assessment to define an Implementation Plan — a document in which you clearly indicate who will do what, when, where, why, and how. We suggest including the following components: Collaboration Plan, Resource Plan, Project Management Plan(s), and Communications Plan. As you create your Implementation Plan, consider what planning templates already exist within your organization, among your partners, or that could be generated using AI.

**TIP:** The information in Phase 4 reflects a comprehensive list of training development activities modeled after how the Regional Public Health Training Centers approach their work. The Public Health Training Center Network (PHTCN) is funded specifically to provide training and technical assistance to meet the needs of the public health workforce.

Depending on your resources, it is okay if you cannot focus on every element of implementation and evaluation described here, especially in your first LASC cycle. With each iteration, you may be able to expand the scope of your approaches. We encourage you to reach out to your Regional PHTC for potential partnership, templates, and resources!

#### *Step 2a. Identify learning opportunity partners in a Collaboration Plan*

At this point, you have considered and cultivated relationships throughout your LASC process — first in Phase 1 as you identified those with connections to your challenge, then in Phases 2-3 as you continued to define your time-bound desired state and Logic Model. As the LASC team developed the Learning Plan, you might have been nervous about how to provide the numerous learning opportunities identified. That's okay! It's important to identify the change and learning needed, even if a single organization can't provide all of the identified training. Various organizations may have the resources, capacity, or connections to take on different learning opportunities.

The Learning Plan in this sense serves as a guide to future partnership building. Though the LASC team may have relationships with a public health association, for example, the Learning Plan may reveal the value of further relationship development and funding strategies with other professional groups, such as city planners, businesses, and other state or local government departments. Other partners might be those with expertise in training development, advocacy, or communication strategies.

In Phase 4, the LASC team must document a Collaboration Plan to identify which specific learning opportunities their organization(s) can host or lead and which will require additional partnership. Determining factors might be the desired impact and learning needed, and the strengths and assets of potential partners related to reaching the intended audience, subject matter expertise, infrastructure and technology, etc.

TIP: As the number of moving parts and contributors increases, it is important to revisit the established processes in your team charter from Phase 1. Define or update processes for making decisions, sharing files and information, managing finances, and coordinating operations as you move forward.

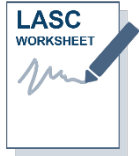
As part of this discussion, identify where there is room for flexibility and where there are firm parameters. These might be informed by grant deliverable requirements, shared priorities, etc.

Table 12 below continues the diabetes challenge example, reflecting a selection of the learning opportunities and learning objectives identified in Phase 3. You'll see that collaborating organizations have been identified to play different roles in implementing the Learning Plan. In addition to the roles of sponsor, change agent, target, and advocate described above in Step 1, some logistical key roles to consider for each learning opportunity include:

- **Planning/Design:** Individuals involved in the planning will refine learning objectives, identify and secure presenters/instructors, and make decisions about logistics. You will think more about the learning opportunity planning committee in Step 1c below.
- **Host:** This organization will provide the physical location or the video conferencing platform for the learning opportunity. They will likely also manage registration and evaluation.
- **Recruitment:** These organizations are closely connected to the intended audience for the learning opportunity and will help promote participation
- **Subject Matter Expert:** Individual(s) from this organization have the content and/or expertise necessary to help achieve the learning objectives

Table 12: Excerpt of a Collaboration Plan from the diabetes challenge example

<b>Learning Opportunity &amp; Objectives</b> Reference your Learning Plan from Phase 3, Step 2 (look at columns 3 and 5)	<b>Role</b>	<b>Organization</b>
<b>Opportunity:</b> Webinar  <b>Objective:</b> List the options for getting a tax passed	Host learning opportunity	Regional Public Health Training Center
	Lead planning/design	LASC team and Regional Public Health Training Center
	Lead recruitment	LASC team and coalition members
	Provide subject matter expertise	Health Department
<b>Opportunity:</b> Presentation at Coalition Meeting  <b>Objective:</b> Describe the role different types of organizations can play in tax initiatives	Host learning opportunity	Health Department
	Lead planning/design	
	Lead recruitment	
	Provide subject matter expertise	Health Department, Department of Transportation, Parks & Recreation Department
<b>Opportunity:</b> Series of facilitated discussions  <b>Objective:</b> Recommend the tax option that makes the most sense to pursue	Host learning opportunity	Diabetes coalition steering committee
	Lead planning/design	
	Lead recruitment	
	Provide subject matter expertise	State Policy Institute



Complete your Collaboration Plan in Phase 4, Step 2a of the LASC worksheet in Section 3.

*Step 2b: Determine budget in a Resource Plan*

While this is discussed in Phase 4, you were probably already thinking about needed and available resources as you considered potential collaborators in Phases 1-3. It is now time to document your budget. Depending on funding sources (i.e., a single funding source vs. multiple), you might develop a Resource Plan and budget for your entire Learning Plan and/or for individual learning opportunities.

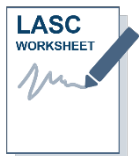
Some common training development expenses to consider:

- Subject matter expert, presenter, facilitator, and/or instructional design fees
- Continuing education (CE) credit consultants and provider fees
- Technology (video conferencing platform, learning management system or other registration platform, survey platform for evaluation, software to support participant engagement or e-learning design)
- Marketing (e.g., email newsletter service)
- Graphic design, stock photos, possible copyright permissions for imagery
- Captioning, transcription, and/or language interpretation services
- Staff time for coordination
- Funds to support partner engagement
- For in-person events: space, A/V equipment, travel, printing, and food

TIP: It is especially important to offer compensation to community members who might be providing their expertise in their own time, outside of the scope of their job.

As you make decisions about operationalizing your learning opportunities (in-person vs. virtual, etc.), remember to reflect on how those decisions influence or are influenced by the Six Conditions of Systems Change such as resource flows, power dynamics, and policies.

The LASC team might identify the need to pursue additional sources of funding such as grants, sponsors, or engagement of additional collaborators. Get creative! Are there existing events or convenings where a given learning opportunity could be incorporated?



Complete the Resource Plan in Phase 4, Step 2b of the LASC worksheet in Section 3.

*Step 2c: Develop specific learning opportunities in a Project Management Plan*

Within your overall Implementation Plan, each individual learning opportunity will have its own development process, documented in the form of a Project Management Plan. Step 2c addresses timeline, content development, promotion, and other logistics. This step also allows you to plan further for the resources needed for implementation. While presented as steps below, these considerations are interdependent and may require a flexible, iterative approach.

As noted in the example Collaboration Plan in Step 2a, learning opportunities might be hosted by various contributing partners. The hosting organization of a given learning opportunity will play a lead

role in developing it, but it is likely that the LASC team will continue to share coordination responsibilities.

TIP: We recognize that Phase 4 can feel intense, and it is likely not feasible to tackle every learning opportunity at once. Your Learning Plan might include many learning opportunities that range in length, dose, interaction, and the time and resources needed to develop them. When you prioritize your learning opportunities, we encourage you to move forward in two ways. First, choose one or two learning opportunities that feel like small wins – these likely use more knowledge-based modalities like a webinar. Second, choose a learning opportunity that is more challenging to accomplish but will have more meaningful impact – these are likely more skills-based or action-oriented in content.

Keep in mind that operationalizing your Learning Plan can be an ongoing process – not every learning opportunity needs to be fully planned to start implementing some of them!

### Planning Committees

Depending on the expertise needed to inform the content, each learning opportunity might require its own planning committee. The job of a planning committee is to refine learning objectives, identify and secure presenters/instructors, and make decisions about logistics. A planning committee ideally includes 3-5 people who can move the training development forward. In this case, your planning committee would likely include members of your core LASC team, partner representatives for a given learning opportunity, and perhaps individuals from the intended audience or those with subject matter expertise.

### Timeline

Consider the following questions for each learning opportunity identified in your Learning Plan:

- What is the required timeline for training? For example, is it time-sensitive to learn about policy advocacy to affect upcoming legislation? Do different aspects of learning need to build on each other sequentially?
- Does training already exist to meet the learning needs, or does new content need to be developed? To answer this question, conduct a simple environmental scan to see if an existing training meets your learning objectives and is appropriate for your audience. (This would be a great project for a student intern!) There are many sources for training, and they vary in quality criteria, modality, etc. We suggest searching in a few ways to get a sense for what is out there:
  - First, determine your search terms based on your training topic, skill area, and learning objectives
  - Use those terms to search through the following databases and websites (see Section 3 for links):
    - Public Health Learning Navigator
    - Regional PHTCs (your own region and/or others)
    - TRAIN
    - Other national resources offering valuable trainings such as the MCH Navigator, CDC, and Substance Abuse and Mental Health Services Administration (SAMHSA)

- Other state or local resources that might provide tailored trainings (e.g., professional associations, Public Health Institutes, foundations, academic institutions)
- Document trainings that seem relevant, along with their date of creation, modality, learning objectives or description, and cost

**You might decide that there are options available that will meet your needs. If so, skip to Learning Opportunity Logistics. If not, continue to Content Development.**

### Content Development

If you cannot find existing trainings to meet your needs, you and your partners will need to develop new content. As you do so, it will be helpful to consider ways to align content across learning opportunities for cohesion in your Learning Plan.

While not necessary, it would be helpful to have someone on the planning committee with experience in adult learning and/or instructional design. This might be a health educator, a university partner, or a consultant. This is another great time to reach out to your Regional Public Health Training Center if you have not already!

Information about the CDC's Quality Training Standards and other resources for adult learning, content development, and instructional design are listed in Section 3.

TIP: There is value in taking the time to go through the instructional design process outlined in models like Analyze, Design, Develop, Implement, and Evaluate (ADDIE) to ensure that the learning opportunity addresses your desired outcomes. Reference Phase 3 where you discussed key questions about your audience and learning objectives and continue to build from there. See Section 3 for several resources.

### Learning Opportunity Logistics

Whether you guide people to an existing training or host a new learning opportunity, there are several logistical considerations to ensure the intended audience can participate. Each of the questions below helps answer the overarching question of how people will access the learning opportunity.

Any learning opportunity (in-person, virtual, or hybrid)

- When will the training occur?
  - What is the ideal day/time to offer the training? Consider the availability of your intended audience for each learning opportunity. Do some participants do fieldwork or see patients, affecting their availability?
  - Does in-person space, virtual seats, or the expected level of discussion limit the number of people who can participate? Does the learning opportunity need to be offered more than once to accommodate everyone?
- How will people register to participate? This could be as simple as a survey form or as complex as a learning management system.
  - Does the hosting organization have an existing learning management system that is accessible to all of the intended audience? One may or may not be needed, depending on the available resources and chosen learning modalities.
- Will CE be offered, and if so, how will it be issued?

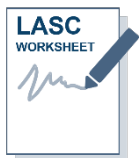
- Some professions require CE credits to maintain certification (e.g., nurses, health educators, physicians, sanitarians, social workers). Do some research to find out if this could be a motivating factor for your intended audience.
- Note that while CE can be a nice incentive to participate, the process for providing CE often requires substantial documentation, a person with that credential on the planning committee, and (possibly) a fee. Start this process early!
- Even if no formal CE is offered, you might choose to offer a Certificate of Completion. Consider what the criteria for earning that would be (e.g., attendance at the full session and completing an evaluation).
- Knowing your audience, do you need to engage language interpreters and offer translated versions of materials?
- Do collaborators have access to platforms for interactions like polls, word clouds, brainstorming, etc.?

#### In-person learning opportunities

- Where will the training be held?
  - Is the location easy to get to (e.g., centrally located for participants)? Is parking available? Is the facility accessible for people with disabilities?
  - Will seasonal weather pose any challenges for travel?
- What audio/visual or other technology needs are there, and what does the location provide?

#### Virtual learning opportunities

- Will the learning opportunity occur synchronously, in real-time, or will it be asynchronous and available on-demand?
- Does the hosting organization have a video conferencing system? Does the system offer opportunities for interaction (e.g., breakout rooms, polling)? Does it offer accessibility features like closed captions and transcription?

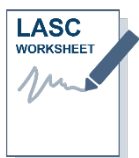


Make notes regarding Project Management in Phase 4, Step 2c of the LASC worksheet in Section 3.

#### *Step 2d: Engage participants through a Communications Plan*

Once you know how your learning opportunity will be offered and how your intended audience will register, you can begin recruitment and marketing efforts. These, along with your plans for disseminating evaluation findings afterward (Step 4a), comprise your Communications Plan.

Several of your previous steps will inform your Communications Plan. In Phase 3, you identified your intended audience. In your Collaboration Plan, you identified who among your team and partners has connections with that intended audience. It is now time to determine what messaging and method of communication will best encourage their participation. Resources to support communicating with adult learners are included in Section 3.



Make notes regarding your Communications Plan in Phase 4, Step 2d of the LASC worksheet in Section 3.

### Step 3: Develop an Evaluation Plan

As in any program planning effort, it is important to define early on how you will know you are successful. Why? Evaluating the Learning Plan will give your LASC team data to assess where you are relative to your time-bound desired state. Here in Phase 4, you will focus on process and outcome data collection. At minimum, you should conduct process and short-term outcome evaluation of all learning opportunities. Ideally, you will also assess the mid-term and long-term outcomes of your comprehensive Learning Plan.

In Phase 5, you will continue to focus on evaluation as you reflect on your findings and decide if you are ready to plan for deeper learning. The LASC process is intended to build over several cycles of increasingly deeper learning opportunities and progress toward your vision.

TIP: Depending on the experience of your LASC team and your available resources, you might consider hiring an external evaluator. Having a third party conduct the evaluation would also help to reduce potential bias. You might find an evaluation partner at an academic institution, at your Regional PHTC, or in a consultant.

Your Evaluation Plan will specify your objectives, what evaluation questions you and your partners wish to prioritize, your evaluation methods and timelines, and how findings will be reported. The Community Tool Box and Agency for Healthcare Research and Quality provide primers on creating evaluation plans that may be useful to your LASC team (see Section 3 for evaluation resources, including those named throughout this phase).

Process and outcome evaluation will occur at multiple levels:

1. Individual learning opportunities (Phase 4)
2. Comprehensive Learning Plan (Phase 4)
3. LASC process (Phase 5)

#### *Step 3a. Evaluate individual learning opportunities*

Your Evaluation Plan should include two types of evaluation – process evaluation and outcome evaluation. Process evaluation documents the activities that took place, examines whether they were implemented as planned, and identifies opportunities for quality improvement. Outcome evaluation focuses on the effectiveness of activities in meeting their intended objectives.

Evaluation of a single learning opportunity focuses on process and short-term outcome evaluation, as it likely will require multiple, multi-modal learning opportunities to affect mid-term and long-term outcomes.

Who should be involved: The planning committee and subject matter experts/instructors for the individual learning opportunity should be involved in determining the evaluation metrics, reviewing the results, and considering opportunities for quality improvement.

#### *Process evaluation for individual learning opportunities*

Process evaluation at the individual learning opportunity level is important for two reasons. First, it provides documentation of your LASC team's efforts, which can and should be celebrated. Tracking how many learners participate and what content is covered enables your team to build momentum for

future iterations of your Learning Agenda and may be of interest to funders. Second, it provides opportunities for quality improvement. After an individual learning opportunity, your planning committee and/or LASC team may benefit from debriefing together. This could occur during a meeting to reflect on the learning opportunity implementation and participant feedback; it could involve collection of planning committee and instructor feedback as well. There are many tools for quality improvement - one common approach is Plan-Do-Study-Act (PDSA).

#### Evaluating short-term outcomes: knowledge and attitude change

Evaluation methods may vary depending on the learning modality. A common framework for evaluating training is the Kirkpatrick Model. This framework defines four levels of training evaluation: reaction, learning, behavior, and results. Opportunities to assess each level also vary by learning modality due to learning conditions (length, dose, and interaction with content).

Learning opportunities focused on knowledge gain and attitude change often use modalities such as webinars, online modules, and presentations. These modalities are typically shorter in length, offered in one dose, and involve limited interaction with content. Reaction, learning, and attitude change are often evaluated with a post-survey, with possible 6-month follow-up.

Typical elements of post-survey evaluations include questions that determine participant self-reported satisfaction, feedback, and perception of whether the learning objectives were met. Including a question about participants' intent to apply what they learned – whether as a closed-ended or open-ended question – can serve as a call to action. A quiz may be appropriate for learning modalities where knowledge gain is the desired short-term impact. You might consider including a pre-test for slightly longer trainings or those that go more in-depth in terms of content. Assessing attitude change might take the form of Likert-scale questions related to participants' likelihood to do something, level of concern about an issue, or level of agreement about the importance of an issue after participating in the training.<sup>xlvii</sup>

#### Evaluating short-term outcomes: skill development

Trainings with longer length, higher dose, and/or more interaction with content may allow for evaluation of behavior and results. Workshop post-surveys might include more open-ended questions about what excited or challenged the learner and how they intend to apply what they learned. One model for this is ORID, an approach to facilitation debriefing developed by the Institute of Cultural Affairs.<sup>xlviii</sup> ORID stands for Objective, Reflective, Interpretive, and Decisional. Some example ORID questions for a cohort-based program focused on adaptive leadership could be:

1. Objective: What have been some of the clearest takeaways from the program so far?
2. Reflective: What excites you most about the possibility of expanding your organization's adaptive capacity?
3. Interpretive: How do you think the tools presented in the program so far address the specific challenges you and your organization face?
4. Decisional: What is one tool or concept from any of the sessions so far that you can apply immediately/have already applied?

While training evaluation often relies on participant self-report, you may find opportunities for other forms of skill assessment and deeper levels of learning. For example, participants might complete a

project or have an opportunity to perform a skill. Supervisors may also provide feedback on their observations of staff application of learning.

### Example of an Individual learning opportunity evaluation

Let's take a moment to build upon the diabetes challenge example (see Table 13). A short-term outcome of the Learning Plan is for coalition partners to have knowledge about options for getting a tax passed. One of the learning opportunities was to develop was a webinar for coalition partners. By the end of the webinar, participants will be able to list the options for getting a tax passed (learning objective).

Table 13: Excerpt from the Evaluation Plan from the diabetes challenge example

Learning Opportunity & Objectives <i>Reference columns 3 and 5 of your Learning Plan from Phase 3, Step 2.</i>	Audience <i>Reference column 2 of your Learning Plan from Phase 3, Step 2.</i>	Before Workshop	After Workshop	Follow-up	Dissemination of Findings
<b>Opportunity:</b> Webinar  <b>Objective:</b> List the options for getting a tax passed	Coalition members and interest holders who share a common goal	Process Eval: <ul style="list-style-type: none"> <li>Number of registrants</li> </ul> Outcome Eval: <ul style="list-style-type: none"> <li>Poll asking participants to gauge current level of understanding of the options for getting a tax passed</li> </ul>	Process Eval: <ul style="list-style-type: none"> <li>Number of participants</li> <li>Debrief with presenters and LASC team to review evaluation results</li> <li>Review participation to determine if we sufficiently reached who we wanted to</li> </ul> Outcome Eval: <ul style="list-style-type: none"> <li>Evaluation survey to gauge whether participants can list multiple options for getting tax passed, their satisfaction with the learning opportunity, and their interest in getting involved with the effort.</li> </ul>	Process Eval: <ul style="list-style-type: none"> <li>Tracking of new coalition members following the webinar</li> </ul>	Share through reporting to funders contributing to effort
<b>Opportunity:</b> Series of facilitated discussions  <b>Objective:</b> Recommend the tax option that makes the most sense to pursue	Coalition steering committee		Process Eval: <ul style="list-style-type: none"> <li>Number of steering committee members involved</li> <li>Number of discussions</li> <li>Decision-making process used</li> </ul> Outcome Eval: <ul style="list-style-type: none"> <li>Steering committee makes a decision about the tax option to pursue</li> </ul>	Outcome Eval: <ul style="list-style-type: none"> <li>Coalition steering committee clearly articulates the decision to the full coalition and gains support</li> </ul>	Share with full coalition  Share with funders  Might share as part of future presentations at conferences



Draft an Evaluation Plan for your learning opportunities in Phase 4, Step 3a of the LASC worksheet in Section 3.

### Step 3b: Evaluate the comprehensive Learning Plan

The Learning Plan you designed in Phase 3 likely included multiple learning opportunities aimed at different short-term outcomes. Since each individual learning opportunity on its own is unlikely to have significant influence on the Six Conditions of Systems Change, it's important to evaluate your Learning Plan as a whole.

Who should be involved: This stage of evaluation will include your LASC team, collaborating partners, and community members. This might be the same group (or a subset of it) who contributed to defining your challenge in Phase 2. Contributors will help define the metrics of interest and reflect upon the findings.

#### Process evaluation for a comprehensive Learning Plan

Process evaluation for a comprehensive Learning Plan allows your LASC team to reflect, in part, upon the number/type of learning opportunities offered; the extent to which learning needs have been addressed; and where there are still gaps that could inform a future LASC cycle. This will also be an opportunity to assess the extent to which your Learning Plan addresses the Six Conditions of Systems Change (in terms of coverage, not yet in terms of impact). Process evaluation for a Learning Plan will also identify who participated in collective learning and whether those participants actually reflect your intended audiences.

#### Evaluating mid-term outcomes: Six Conditions of Systems Change

Evaluating the impact of learning at the organizational, community, or systems level is challenging. Change at these levels takes time, and it may be difficult to ascertain a Learning Plan's causal effect due to numerous potential confounding variables and the resources required to support that level of evaluation.<sup>xlix</sup> Still, existing evaluation models and approaches may be of use to your LASC team. The following approaches align with one or more of the Six Conditions of Systems Change (policy, practice, resource flows, relationships & connections, power dynamics, and mental models). See Section 3 for links to each resource mentioned.

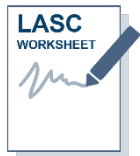
- Organizational Culture Change – The Center for Creative Leadership offers a white paper on *How to Know if Your Culture Change Strategy is Working*. It identifies different quantitative and qualitative approaches for measuring shifts in beliefs, practices, and outcomes for an organization.
- Workforce Assessments – Surveys such as the Public Health Workforce Interests and Needs Survey (PH WINS) provide information about workforce composition, satisfaction, training needs, and familiarity/engagement with concepts such as the social determinants of health.
- Mindset Shifts – The Frameworks Institute offers guidelines and considerations for *Measuring Mindset Shifts and Evaluating Mindset Shift Efforts*. This resource may be useful in thinking about how to evaluate changes to mental models.
- Policy, Systems, and Environmental (PSE) Change - A brief by the UIC P3RC defines PSE changes as those that “influence laws, shape physical landscapes, and help to improve institutions to make healthy living easier and to tackle the root causes of health inequities”<sup>i</sup>. The CDC has prioritized PSE-change initiatives in its Prevention Research Centers. Evaluation of these initiatives often focuses on the mid-term outcomes of adoption, implementation, or maintenance of PSE changes. Another relevant mid-term outcome variable to consider may be changes to partnership capacity and relationship building.<sup>ii</sup>
- Health in All Policies (HiAP) - The HiAP approach ensures “that policy decisions have neutral or beneficial impact on health determinants.”<sup>iii</sup> The National Association of County and City Health Officials (NACCHO) offers the *Health in All Policies Evaluation Guidance for Local Health Departments*. This guide suggests process and outcome metrics for each of seven HiAP implementation strategies. Again, many of the metrics focus on mid-term outcomes related to policy and practice among partners.

- Health Equity Impact Assessments – A Health Impact Assessment is typically part of the HiAP process, and a focus on equity is critical. The Society of Practitioners of Health Impact Assessment (SOPHIA) released *Equity Metrics for Health Impact Assessment, Version 2* in 2016. The HIA Equity Evaluation Tool offers several metrics and data collection methods that may be relevant in evaluating your Learning Plan.
- Inquiry Framework - The Tamarack Institute provides a useful inquiry framework with specific systems change evaluation questions and methods for consideration.

### Example of a comprehensive Learning Plan evaluation

Let's return to our diabetes challenge example. The LASC team's desired long-term impact was that *the county has increased the funding over the next 10 years for recreational parks and greenspaces in this community to provide parity with other more well-resourced areas of the city*. One of the intended mid-term outcomes was to *pass a tax that creates a new funding stream for greenspace creation, renovation, and maintenance* (policy). The LASC team's Learning Plan included multiple learning opportunities designed to address the short-term outcome of knowledge about *options for getting a tax passed*. Process evaluation questions here could include what actions the coalition took to apply what was learned, etc.

At this point, outcome evaluation may focus on answering the question of whether the desired mid-term outcome was achieved. Was a tax policy passed? What did the policy include? How comprehensive is it? How can the policy's effects be assessed over time?



Note your ideas for evaluating the mid-term outcomes of your Learning Plan in Phase 4, Step 3b of the LASC worksheet in Section 3.

#### Step 4: Implement and evaluate your learning opportunities & Learning Plan

First, take a moment to celebrate this milestone. You made it through an in-depth, engaged planning process – now it's show time! While it can be nerve-wracking to finally implement what you have spent time preparing for, know that your LASC team and partners will continue to build upon this work. The LASC process – with its emphasis on relationship-building and problem definition at the root cause-level – is just as important and meaningful as the planned learning opportunities themselves. Stay flexible and reflect on areas for quality improvement as you implement and evaluate your Learning Plan.

#### Step 4a. Disseminate evaluation findings

We began Phase 4 by considering how to leverage change leadership skills toward the time-bound desired state, including the importance of sharing progress with leadership to build support and confidence in the LASC process. Your evaluation efforts – both process and outcome – provide you with quantitative and qualitative data to make the case for sustaining your effort. This data can also be informative to others interested in implementing the LASC process in their own communities or regarding other challenges. Consider opportunities to share your findings. This might be through staff or coalition meetings, conference presentations, publications, blog posts, etc. Do your intended audiences for these communications go beyond your intended audiences for learning? For example, what about your funders and coalition partners who assisted in the LASC process? What will be of interest to your various audiences?

TIP: The PHTCN would love to hear about your experience with the LASC Toolkit 2.0! Get in touch at [hello@publichealthlearningagenda.org](mailto:hello@publichealthlearningagenda.org).

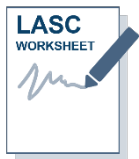


Document your plans for sharing your findings in Phase 4, Step 4a of the LASC worksheet in Section 3.

#### Team Reflection

Consider the evaluation metrics your LASC team chose to prioritize at each evaluation stage. What do these decisions tell you about your shared values and mental models?

In Phase 5, you will continue to reflect on your Learning Agenda as a whole, consider progress toward your vision, and think about what the focus of the next iteration of your work should be.



Before moving on to Phase 5, reflect on your implementation plan partners, resources, and logistics in Phase 4, Team Reflection in the LASC worksheet in Section 3.

## Phase 5: Reflect & Revise

Welcome to Phase 5: Reflect & Revise. Congratulations! You have completed your first Learning Plan and may have even collected evaluation data to assess its impact. In Phase 5, you'll reflect on your experiences and what the evaluation data means for making progress toward your time-bound desired state and vision of systems change. Phase 5 is also an opportunity to assess what worked during both Learning Plan implementation and your overall LASC process to date, document what you've learned as a LASC team, and understand your readiness to undertake systems change - all while you identify your focus of your next LASC cycle. Have questions? Need additional resources? Visit Section 3 and [www.publichealthlearningagenda.org](http://www.publichealthlearningagenda.org).

### Introduction

In Phase 4, you implemented and evaluated your first Learning Plan to help address the sub-factor identified from your adaptive challenge. This included:

- Delivering learning opportunities to your staff, partners, or community members to increase knowledge, application, and skills that help shift mental models and actions toward your time-bound desired state
- Working as a LASC team to provide systems change leadership, while planning implementation and providing support (i.e., staffing, partnerships, funding, communications, etc.) to ensure the on-time, on-budget delivery of high-quality learning opportunities
- Evaluating if and how the learning opportunities increased competency to address the time-bound desired state, as well as your Learning Plan's overall impact toward the systems change vision based on the Six Conditions of Systems Change

Phase 5 is an opportunity to use evaluation data from the LASC experience to reflect on three important aspects of your work to date:

- How did our Learning Plan from Phase 3, Step 2 help increase learning toward our time-bound desired state?
- How effective was our implementation process?
- How have we improved our readiness for the overall LASC process toward systems change?

By reflecting on these three aspects of your LASC work, you can frame your next LASC process based on opportunities for improvement. Phase 5 will also help you to identify what you learned overall and what new mental models and questions you could consider exploring in the next LASC cycle.

### Why is Phase 5 important?

Phase 5 is important because it provides time for your LASC team to reflect on and revise your LASC process going forward, benefiting both your Learning Plan and your LASC efforts. Even more so, it enables your team to better support systems change through transformative learning. Systems change is a relationship-based process where we collectively identify assumptions and understandings about the root causes of adaptive challenges. It is also about identifying small actions that may produce big changes. Our Learning Plans work to shift mental models and generate new pathways to address these challenges in ways that facilitate equity. Systems change is also about expanding our change readiness as LASC teams and in our organizations, partners and communities. We can only understand our progress – and how we can further or deepen our work – if we take time to reflect together. This reflection and the accompanying dialogue are, in and of themselves, a way to foster shared learning. Essentially, shared learning like this promotes a learning culture that supports future systems change.

## How can the Four Foundational LASC Principles help support Phase 5 work?

- **Equity** relates to Phase 5 in a number of ways. First, Phase 5 provides an opportunity to assess if and how the learning opportunities and the comprehensive Learning Plan shifted learning toward the time-bound desired state in a way that aligns with equity principles and practices. Second, you may want to reflect on if and how each learning opportunity was delivered in ways that fostered belonging, inclusion, and diversity concepts and principles (e.g., inclusive examples, language, and presentation; use of storytelling). Third, considering equity in Phase 5 will lead you to evaluate your LASC team and collaborators to determine who else may be needed to understand the adaptive challenge going forward.
- **Leadership** helps to facilitate dialogue in constructive and open ways. It is important to be transparent and honest about what worked in the LASC process (or not) to help inform the next cycle. Leadership should also foster decision-making in generative, constructive ways to define the next desired state, and to reflect on the overall vision. Leadership should amplify appreciative and strength-based approaches to what worked. This includes ensuring that the time-bound desired state is achievable, focused, and clear. Effective leadership is required to confirm that the LASC team and collaborators are committed to the next cycle of the work, and that they feel motivated about the path forward. Finally, leadership should help assess and consider the ways in which collective action and collective learning has occurred.
- **Systems thinking** helps lead dialogue that uncovers if and how mental models shifted during this LASC cycle. For example, systems thinking can elevate assumptions around what evaluation data might mean or from what perspective we are seeing the challenges and opportunities. It can also identify connections to outcomes of each learning opportunity or the comprehensive Learning Plan and how those relate to the time-bound desired state. Systems thinking is also needed to assess how evaluation data and lessons learned from the LASC process may contribute to shifting the system itself (i.e., were small changes or new connections identified that help strengthen a response?). Being able to understand which shifts in mental models, new perspectives, different connections, or leverage points address the root causes in the adaptive challenge (and which additional shifts are necessary to continue the work) is an important systems thinking skill.
- **Engagement** of diverse partners or collaborators in review of the evaluation data and reflection process is crucial. As you reflect on what worked (or not) and why, and as you redesign or revise your next LASC cycle, it's important to include multiple perspectives in the discussion. Only then can you ensure that your next learning opportunity and comprehensive Learning Plan aligns with strengths, assets, and the areas of most need and urgency. This is also an opportunity to ensure that everyone is aligned regarding what happened during the process and has a voice in what happens next.

### Phase 5 includes three steps:

- Step 1: Reflect on your systems change leadership and Implementation Plan experiences
  - Step 1a. Reflect on your LASC team's systems change leadership experience
  - Step 1b. Reflect on your Implementation Plan experience
- Step 2: Reflect on evaluation data and agree on the revised time-bound desired state
  - Step 2a. Reflect on short-term process and outcome evaluation data for each learning opportunity
  - Step 2b. Reflect on the comprehensive Learning Plan
  - Step 2c. Reflect on mid-term outcomes

- Step 2d. Decide if, how, and why the time-bound desired state might change
- Step 3: Assess LASC team readiness as a high functioning team focused on systems change
  - Step 3a. Assess your LASC team for Five Key Actions of High Functioning Teams Focused on Systems Change
  - Step 3b. Assess current team readiness against each of the LASC principles

### Step 1: Reflect on your systems change leadership and Implementation Plan experiences

Successful systems change requires effective leadership and implementation. To continually improve your LASC efforts, you need to understand how the team feels about the quality and impact of your leadership and collaboration, as well as your Resource, Project Management, and Communications Plans. Even if you did not have distinct plans for all these pieces, it's important to reflect on and discuss overall implementation efforts.

For the team's reflection, consider these overarching questions:

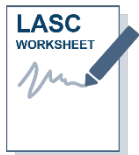
- What happened? (What occurred, what was the process like?)
- What went well?
- What was challenging?
- What could be improved?

#### Step 1a: Reflect on systems change leadership

This is an opportunity for the LASC team to have a facilitated conversation around the elements of systems change leadership introduced in Section 1 and discussed in more depth in Phase 4:

- Understand change as a process, your team's responses to change, and how to improve resilience
- Clarify the why behind the change and ensure there is a clear, inspirational, focused future state vision that all team members understand
- Clarify roles and responsibilities in the change process
- Communicate and communicate again

What activities did your team do and how did they go? What opportunities for improvement do you see for future collaborative work?



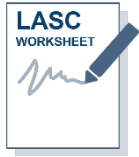
Complete the systems change leadership discussion guide in Phase 5, Step 1a of the LASC worksheet in Section 3.

#### Step 1b: Reflect on the Implementation Plans

Using the guiding reflection questions above, your team should reflect on each element of the Implementation Plan you created in Phase 4:

- Collaboration Plan
- Resource Plan and Budget
- Project Management Plan
- Communications Plan
- Evaluation Plan

What activities did your team do and how did they go? What opportunities for improvement do you see for future collaborative work?



Complete the Implementation Plan discussion guide in Phase 5, Step 1b of the LASC worksheet in Section 3.

*Step 2: Reflect on evaluation data and decide the next or revised time-bound desired state*

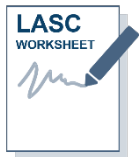
During Phase 4, you worked through your Evaluation Plan, considering short-term outcomes for each individual learning opportunity – process outcomes, as well as knowledge, skill, and attitude changes. In addition, the team planned evaluation for mid-term outcomes aligned with the Six Conditions of Systems Change. During Phase 5, it's important that your LASC team reflect on these evaluation findings to consider possible steps for your next LASC cycle.

Refer back to the data collected as part of the Evaluation Plan you created in Phase 4. Reflect on the following:

- The short-term evaluation data for each individual learning opportunity (from Phase 4, Step 3a)
- The short-term evaluation data for the comprehensive Learning Plan (from Phase 4, Step 3b)
- The mid-term outcome data (from Phase 4, Step 3b)

*Step 2a. Reflect on process and short-term outcome evaluation data for each learning opportunity*

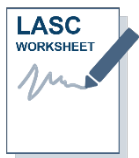
Have a facilitated conversation with the LASC team on the data for each learning opportunity. What process metrics were collected? What changes in knowledge, skills, or attitudes were measured? What were the results and what meaning do you make of those results? What do the results suggest for future learning opportunities? How were these results collaborative or collective in action? Where are the opportunities for improvement?



Complete the reflection chart for your short-term outcomes in Phase 5, Step 2a of the LASC worksheet in Section 3.

*Step 2b: Reflect on your comprehensive Learning Plan*

Now reflect on the data across the multiple learning opportunities included in your Learning Plan. To what extent did the individual learning opportunities within your plan build upon each other to address the Six Conditions of Systems Change? What gaps still exist and what are the opportunities for future efforts?

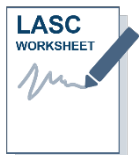


Complete the comprehensive Learning Plan evaluation data discussion guide in Phase 5, Step 2b of the LASC worksheet in Section 3.

*Step 2c. Reflect on evaluation data from your mid-term outcomes (using the Six Conditions of Systems Change)*

What data or information do you have on progress toward achieving any of your mid-term outcomes? What progress has been made on any of the Six Conditions of Systems Change? Consider what went well and celebrate the successes! If change *didn't* occur, why do you think that was? What improvements could be made to learning opportunities or the LASC process to further move the needle? Here are some additional questions to get you started:

- Policies: Where did policy change occur or not occur? What served as facilitators or barriers to policy change? How did organizational policies facilitate or impede the LASC process?
- Practices: Where did practice change occur or not occur? Why do you think that was? How was the LASC process aligned with other existing plans and processes? Where is there opportunity for greater integration? How did organizational practices facilitate or impede the LASC process?
- Resources: In what ways did resource flows change or not? Were necessary resources available (e.g., human, financial, data, technology, etc.)? If not, what opportunities are there to get them? Are resources available to sustain your momentum? What additional resources (e.g., human, financial, knowledge, etc.) are needed before the next iteration? How can you aim for deeper levels of impact in your next iteration of the LASC?
- Relationships & Connections: How did relationships impact your outcomes? What partners were included in your LASC process? When and how were they involved? How effective was communication between partners? What opportunities are there to continue building trust? In what ways did relationships change during the LASC process? Who else should be engaged?
- Power: What changes in power were achieved? Was power or influence gained by any groups? Were new groups, coalitions, or collaborations created or strengthened during the LASC process? What was the outcome? Who was involved in decision making during your LASC process? In what ways did that impact the outcomes? How was equity considered throughout your LASC process? How was leadership, power, and decision making shared? How did co-creation or co-design occur?
- Mental Models: What assumptions were challenged as part of this process? Whose assumptions were challenged? What changes, if any, resulted from shifts in beliefs or mindsets? What does the continuation of this work look like? What new questions do you have?



Document your reflections on changes to the mid-term outcomes in Phase 5, Step 2c of the LASC worksheet in Section 3.

*Step 2d. Decide if, how, and why the time-bound desired state might change*

Now that you've discussed your individual types of evaluation data, it is important to look across all of the data points to: synthesize progress made on the Learning Plan; determine progress toward the time-bound desired state; and discuss what changes, if any, you want to make for your next LASC cycle.

In Step 2d, we suggest that your LASC team have a facilitated discussion to consider these overall evaluation findings using the questions below.

1. What are 3-4 overall findings from your evaluation of your LASC Learning Plan?
2. What evidence suggests that you made progress to achieve your time-bound desired state?
3. What evidence suggests you are ready to revise your time-bound desired state OR select a new sub-factor in your next LASC cycle?
4. What are your early thoughts on if and how you might change your time-bound desired state or select a new sub-factor? How would you change your time-bound desired state based on your evaluation data? Or what new sub-factor might you select and why?

Based on this discussion, the LASC team may determine that more work is needed to fully address your selected sub-factor, but that you want to modify your time-bound desired state to try a new Learning Plan approach. If this is the case, your team may choose to return to Phase 3 (after updating your time-bound desired state from Phase 2, Step 3) of the LASC process.

Or you may decide that you've sufficiently addressed the sub-factor, you've reached the time-bound desired state, and it's time to select a new sub-factor and set a new time-bound desired state. In this case, your LASC team will return to Phase 2, Step 2.

Given that systems change takes time and that many complex challenges have multiple systemic sub-factors at their root, you will likely need multiple iterations of the LASC (focused on revisiting Phases 2 or 3 as shown in Figure 20). During the full LASC process, your team will achieve multiple time-bound desired states, which compound to bring about the future state vision the team articulated in Step 1 of Phase 2.

Figure 20: Multiple iterations of the LASC process



Capture your insights from your team's discussion in Phase 5, Step 2d of the LASC worksheet in Section 3.

Step 3. Assess LASC team readiness as a high functioning team focused on systems change

The final reflection for Phase 5 revisits your team's current level of readiness, learning, and areas for growth in team development, team facilitation, and process management, along with the four Foundational LASC Principles of equity, systems thinking, engagement, and leadership.

*Step 3a. Reflect on the elements of team functioning*

Refer back to your team's initial assessment results captured in your Phase 1 LASC worksheet in Section 3.

- Where did your team start on each of these five elements of team functioning?
- What did your team do to increase their readiness in each area?
- What happened during the LASC process that offered your team an opportunity to apply each element of team functioning?
- What learning occurred during the LASC process?
- What more do you need to do to advance your team functioning for your next LASC cycle?



Use the discussion guide to capture your insights in Phase 5, Step 3a of the LASC worksheet in Section 3.

*Step 3b. Reflect on team readiness for the four Foundational LASC Principles*

Next, reflect on changes that have occurred for your team related to the four Foundational LASC Principles of equity, systems thinking, engagement, and leadership.

- Where did your team start on each of these Foundational LASC Principles?

- What did your team do to increase their readiness on each Principle?
- What happened during the LASC process that offered your team an opportunity to apply each Principle?
- What learning occurred during the LASC process?
- What more do you need to do to advance your team’s understanding and application of the Foundational Principles during your next LASC cycle?



Use the discussion guide to capture your insights in Phase 5, Step 3b of the LASC worksheet in Section 3.

## Conclusion

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***Congratulations!** You have completed your first LASC cycle! Be sure to find a way to celebrate your hard work and learning with your LASC team and partners.*

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Improving public health in the 21st century requires practitioners to address the complex social, environmental, and economic factors where we live, work, learn, and play. As the world of public health evolves, so do the skills required to adapt, work across sectors, and seek out and address root causes. Developing these cross-cutting, strategic leadership skills calls for a new approach to learning.

The LASC Toolkit 2.0 shows how having a strong, relationship-focused team, diagnosing adaptive versus technical challenges, identifying small actions that can produce big changes, and articulating time-bound desired states can lead to a responsive Learning Plan that progressively builds the workforce’s ability to achieve meaningful systems change. The tools in this Toolkit can help organizations and communities be more intentional with their learning to achieve the change they envision. We hope the LASC Toolkit 2.0 will be used by practice partners, including public health organizations, workforce development specialists, and associations that champion national workforce strategies, to achieve their goals.

We encourage you to get in touch! If you would like to share your LASC experience with us and others – your successes and challenges – please complete the [form on our website](#) or contact us at [hello@publichealthlearningagenda.org](mailto:hello@publichealthlearningagenda.org).

## Section 3: Glossary, Resources, & Other Tools

### Comprehensive Glossary

*Note: terms are organized in alphabetical order, with sub terms listed under their associated term.*

- **Adaptive Challenges** are those wicked problems of society – recurring complex social or cultural problems.<sup>liii</sup> These challenges have no known solutions. They require learning and collaboration to solve; involvement of those closest to the problem; and changes in beliefs, values, and ultimately systems. Despite attempts to solve them in the past, these are the sticky challenges that persist.
- **Bloom’s Taxonomy** is a framework for identifying and classifying learning objectives. It includes six levels of learning that progress from lower-order to higher-order thinking skills: remembering, understanding, applying, analyzing, evaluating, and creating. It is a tool for reflecting on the goals of a learning opportunity – for instance, recalling information (remembering) vs. using information in new situations (applying) vs using information to create something new (creating).
- **Collective Learning** “is a process where a group of people acquires skills, knowledge, and behaviors through interactions with each other and their environment. This includes sharing experiences and information and collaborating to solve problems. The result is a collective understanding and intelligence that can enhance the group’s ability to innovate new solutions.”
- **Competency** is the integration and application of learned knowledge and skills in a contextually appropriate way. Someone who is competent in an area can use the body of knowledge and skills they have in that area to accomplish tasks and goals beyond an educational or training setting.<sup>liv</sup>
- The **Current State** describes the challenge facing your community or organization.
- **Effective teams for systems change** ideally have diverse strengths, expertise, perspectives and experience; establish trusting relationships where authentic dialogue occurs to uncover and discuss mental models; co-create a common vision and goals for both the LASC process and their work as a team; and have clear roles and responsibilities within the team and the LASC process.
- An **Evaluation Plan** outlines how you and your collaborators are defining success for your Learning Plan and how you will measure it.<sup>lv, lvi</sup>
  - **Process evaluation** documents the activities that took place, examines whether they were implemented as planned, and identifies opportunities for quality improvement.
  - **Outcome evaluation** focuses on the effectiveness of activities in meeting their intended objectives.
- The **Future State** describes your community or organization’s vision of where you would like to be if the challenge were addressed.
- An **Implementation Plan** “is a planning tool used to document key aspects guiding a change effort, including implementation goals, strategies used, person(s) responsible, and timeline”.<sup>lvii</sup> For the purposes of operationalizing your Learning Plan, your Implementation Plan should document your strategies for collaboration, resources, project management, and communications.
  - A **Collaboration Plan** articulates roles and responsibilities for all organizations involved in implementing a Learning Plan or a specific learning opportunity.
  - A **Resource Plan** identifies the human and financial resources available and/or needed to implement a Learning Plan and its multiple learning opportunities. A resource plan includes a budget and may include pursuing additional funds if needed.

- A **Project Management Plan** tracks the logistics for each learning opportunity within a Learning Plan. This includes identifying planning committees, timelines, content development, and other logistics.
  - A **Communications Plan** documents what you will do to promote each learning opportunity to recruit your intended audience.
- **Interaction (in learning/training)** refers to the interaction between the learner and the content to support engagement and achievement of the learning objectives. It can take the form of activities in a self-paced e-learning (e.g., match concepts to words), reflections (individual or with peers), instructor-led courses, or practice-based learning (working on a project with feedback from advisors/coaches or faculty).
- **Interest Holders** include individuals, groups, or organizations that have an investment in a particular issue. Interest holders include those who are personally affected by an issue, those whose constituents are affected by an issue, and those with power or influence over some element of the issue. Interest holders may have different opinions about and experiences with the issue.
- A **Learning Agenda** is an action-oriented process for organizations, their partners, and communities to use transformative learning as a driver for systems change. A Learning Agenda is also a product containing a dated record from each phase of work. A **Learning Culture** is an environment that fosters learning in positive, generative ways.
- **Length and Dose** refer to the duration of a learning opportunity (e.g., 2 hours) and how often and over what period it occurs (e.g., once, or every week for 1 month). Typically, learning opportunities of longer length and dose are needed to achieve more complex learning objectives requiring higher-order thinking skills (e.g., analyzing, evaluating, creating).
- **Learning Objectives** are brief statements describing the knowledge, skill, and attitude change that will result from a learning opportunity.
- A **Learning Opportunity** is an individual instance of learning/training for a particular audience, with intentionally designed length, dose, and interactions. Examples of learning opportunities might include a webinar for clinicians or a multi-year learning collaborative with clinicians, public health directors, and community leaders.
- A **Learning Plan** is an outline of one or more learning opportunities and learning approaches needed to achieve the systems change identified in your time-bound desired state. The learning focuses on at least one root cause (contributing sub-factor) and will contain multiple learning opportunities focused on your short-term and mid-term outcomes. The Learning Plan is a collective document that addresses the learning needed for multiple audiences across multiple sectors and subsequently addressed by multiple partners.
- A **Logic Model**, for purposes of the LASC, shows the connection between learning required to achieve: short-term outcomes (changes in knowledge, skills, attitudes); mid-term outcomes (changes in conditions such as policy, practices, resource flows, relationships); and long-term outcomes (systems change indicators around the time-bound desired state, such as changes in culture).
- **People with lived experience** are those directly affected by social, health, public health, or other issues and by the strategies that aim to address those issues. Their lived experience gives them insights that can inform and improve systems, research, policies, practices, and programs. When we

say lived experience, we mean knowledge based on someone's perspective, personal identities, and history, beyond their professional or educational experience.<sup>lviii</sup>

- **Readiness for systems change** means individuals, teams, and organizations have the knowledge, experience, shared vision, trusting relationships, and capacities to undertake a collective process of transformative learning.
- A **Root Cause** is the fundamental reason for the occurrence of a problem.<sup>lix</sup> Root causes are underlying systems and structures of social injustice that generate health inequity over time, such as white supremacy, patriarchy, and class oppression. They interact with each other to produce social exclusion, marginalization and exploitation.<sup>lx</sup>
- The **Six Conditions of Systems Change**, defined in The Water of Systems Change Model, include policies, practices, resource flows, relationships & connections, power dynamics, and mental models.<sup>lxi</sup>
- **Social Determinants of Health** are the underlying community-wide social, economic and physical conditions in which people are born, grow, live, work, and age. They affect a wide range of health, functioning, and quality-of-life outcomes and risks. These determinants, and their unequal distribution according to social position, result in avoidable and unfair differences in health status between population groups.<sup>lxii</sup>
- **Structural Determinants of Health** address the broader issues of climate, societal norms, macroeconomic social/health policies and systems of power. These determinants negatively impact social determinants of health for people who have been historically marginalized and ultimately produce health inequities.
- **Systems** are the organizations, policies, laws, and power structures that impact health.<sup>lxiii</sup>
- **Systems Change** is a collective, relationship-based process that involves diverse groups of people looking at the root causes of complex challenges from different perspectives. Through a shared understanding of the problem - built through dialogue that can only occur through trusting relationships - we can often drive reexamination of shifts in power, policy, practices and resource flows at the core of the challenge.
- **Systems Change Leadership** key concepts include understanding change as a process, inspiring others toward a time-bound desired state, clarifying roles and responsibilities in the change process, and communicating expectations.
- **Systems Thinking** includes synthesis and integration of information - zooming out to see the larger picture while also zooming in to see details - and connecting ideas and resources and activities where they align. While there is no single definition, five concepts are important to practice systems thinking:
  - Committing to learning. This means adopting an inquiry-based, 'what-if' or 'not-knowing' mindset and preparing to see other answers/perspectives that challenge one's own thinking
  - Understanding and reflecting on diverse perspectives regarding the challenge
  - Seeing the connections within a system (e.g., networks of people or resources) or between systems, interconnections, leverage points, and feedback loops that reveal opportunities for maximizing resources and benefits
  - Distinguishing between technical and adaptive aspects of complex challenges and looking beyond the obvious issues for root causes

- Understanding the various pieces within whole systems
- **Technical Challenges** are challenges in which there are known solutions or that can be solved by an expert. Although some solutions to technical challenges are simple and others more complicated, there is agreement on the solution and proven best practices to address it.
- The **Time-bound Desired State** is the desired state for one iteration of a Learning Agenda, also known as the long-term outcome of the Learning Agenda logic model (see Phase 3).
- **Transformative Learning** is a process that facilitates examination of one's beliefs; shifts thinking around those beliefs; and ultimately changes behavior.
  - **Transformative individual learning** occurs when individuals reflect on their own thinking and compare their thinking with an experience, another idea, or a diverse perspective. This comparison allows for new insights and observations that challenge status quo ways of thinking and being.
  - **Transformative collective learning** occurs when individuals participate in a learning opportunity with others, with the opportunity to reflect and process together to explore root causes and diverse perspectives. When learning happens with others, there is the opportunity to discover shared values, beliefs, and ways of operating that can shift cultural norms and foster collective actions toward a shared vision.
- The **Transition State** is the change process your community or organization will undergo through learning to move from the current to the future state. During this transition state, your community or organization will work on multiple iterations of the Learning Agenda. Each iteration will focus on a single time-bound desired state.
- **Upstream** is working to address the social determinants of health (the conditions in which people are born, grow, live, work, and play).<sup>lxiv</sup>
- A **Workforce Development Plan** is an assessment of the knowledge and skills of the current workforce linked to the anticipated knowledge and skills of the future workforce to best meet agency goals and objectives. These goals and objectives are determined by a strategic plan which recommends changes to the way the workforce is recruited, hired, and retained (including how the current workforce will be replaced due to attrition). In short, a workforce development plan attempts to get the right people in the right job at the right time with the right knowledge and skills.<sup>lxv</sup>

## Resources

The resource list below includes tables, links, and additional context for resources that may be useful to your team as you progress through each phase of the Learning Agenda for Systems Change process. For resources without a specific link, further information can often be found through a simple online search.

The [Public Health Training Center Network](#) (PHTCN) is a consortium of HRSA-funded, university-based centers that works with local, state, regional, and national partners to develop free and low-cost trainings for the public health workforce, which are available on the PHTCN website.

The PHTCN may be able to consult or provide training resources as part of your LASC process. Contact your [Regional PHTC](#) or the [LASC Leadership Team](#) with questions. (Feedback appreciated!)

### Section 1

SYSTEMS THINKING AND SYSTEMS CHANGE - Here are some resources to help you get started or refresh your knowledge on systems thinking and systems change.

- [Leading Systems Change in Public Health: A Field Guide for Practitioners](#), de Beaumont Foundation, 2021
- [The Water of Systems Change](#), FSG, 2018
- [The Dawn of System Leadership](#), Stanford Social Innovation Review, 2014
- [Finding Leverage – The Power of Systems Thinking with Chris Soderquist on Vimeo](#), 2014
- [Becoming a Systems Thinker](#), Rocky Mountain Public Health Training Center, 2024
- [Think Again: The Power of Knowing What You Don't Know](#), Adam Grant, 2023

### Section 2 - Phase 1

TRUST AND RELATIONSHIP BUILDING - Here are several resources that focus on building trusting relationships, understanding their importance in systems change, and practical tips for team building.

- [The Relational Work of Systems Change](#), Stanford Social Innovation Review, 2022
- [The CliftonStrengths Assessment](#) (formerly StrengthsFinder 2.0), Gallup, 2025
- [Leading Systems Change in Public Health: A Field Guide for Practitioners](#), de Beaumont Foundation, 2021. In particular, see:
  - Chapter 2. Racial Justice and Power-sharing: The Heart of Leading Systems Change.
  - Chapter 4. Personal Leadership: The Requirement to Show up Authentically to Advance Systems Change.
  - Chapter 5. Interpersonal Leadership to Effect Systems Change in Public Health.
  - Chapter 7. Team and Cross-Sector Leadership: Developing Teams for Systems Change.
- Tapia, Polonskaia, Wang, Kezlett, and Orr. Head and Heart Inclusive Leaders For An Equitable Future. Korn Ferry.
- [Begin with Trust](#), Harvard Business Review, 2020

FACILITATION – The following resources provide information on creating spaces for generative conversations, including planning, appreciative and strength-based facilitation frameworks, and conflict resolution.

- [The Institute of Cultural Affairs](#), 2022
- [What are Dialogue & Deliberation?](#), National Coalition For Dialogue & Deliberation, n.d.
- [Crucial Learning](#), n.d.
- [What is Appreciative Inquiry \(AI\)?](#), The Center For Appreciative Inquiry, 2025
- [Atlas of the Heart: Mapping Meaningful Connection and the Language of Human Experience](#), Brené Brown, 2021
- [Crucial Conversations](#), Kerry Patterson, Joseph Grenny, Ron McMillan, & Al Switzler, 2012
- [Relationship Mapping 101](#), Visible Network Labs, 2023

## Section 2 - Phase 2

ASSET-BASED APPROACHES – These resources offer ideas for focusing on opportunities within the community and root causes of success, with tools for implementation.

- [Asset-Based Community Development Institute Resources](#), DePaul University, 2025
- [What is Asset Based Community Development \(ABCD\)](#), Collaborative for Neighborhood Transformation, n.d.
- [Guide to Appreciative Inquiry](#), FSG, 2015
- [Strengths, Opportunities, Aspirations and Results \(SOAR\) Worksheet](#), National Alliance of State and Territorial AIDS Directors (NASTAD), 2021
- [The Thin Book of SOAR: Building Strengths-Based Strategy](#), Jacqueline Stavros & Gina Hinrichs, 2009
- [Cooperrider Center for Appreciative Inquiry Resources](#), Champlain College, 2025

COMMUNITY DATA SOURCES – The following sources are a great starting point for gathering health and equity data, including local- and state-specific assessments, about the community in which you are interested.

- [County Health Rankings and Roadmaps](#), University of Wisconsin Population Health Institute, 2025
- [National Environmental Public Health Tracking Network](#), Centers for Disease Control and Prevention, 2025
- [Social Vulnerability Index](#), Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry, 2024
- [Community Commons](#), i-p3 (Institute for People, Place, & Possibility), n.d.
- State-specific health inventories (e.g., [Colorado Equity Compass](#), [Utah Healthy Places Index](#), [CA Healthy Places Index](#))
- [Neighborhood Atlas and the Area Deprivation Index \(ADI\)](#), Center for Health Disparities Research, University of Wisconsin-Madison School of Medicine and Public Health, n.d.
- Robert Wood Johnson Foundation supported [health data sources](#) including:
  - [City Health Dashboard](#)
  - [PLACES](#)

- [Child Opportunity Index](#)
- [Congressional District Health Dashboard](#)
- [Introducing Community Data](#), Coalitions of Communities of Color, 2024

SYSTEMS PRACTICE – These resources help you support good systems practice by identifying the main elements, connections, and relationships that exist within communities.

- [The 5 R’s Framework: Results, Roles, Relationships, Rules, and Resources](#), U.S. Agency for International Development, 2016
- [Multi-Stakeholder Partnerships Tool Guide](#), Wageningen Centre for Development Innovation (WCDI), Wageningen University and Research, 2017
  - [Rich Picture](#), Wageningen Centre for Development Innovation (WCDI), Wageningen University and Research, n.d.
- [Becoming a Systems Thinker](#), Rocky Mountain Public Health Training Center, 2024.
- [Relationship Mapping 101](#), Visible Network Labs, 2023

PRIORITIZING AND IDENTIFY ROOT CAUSES – Here are some resources to help you facilitate the process of prioritizing and identifying root causes of community challenges.

- [Mobilizing for Action through Planning and Partnerships \(MAPP 2.0\)](#), National Association of County Health Officials, updated in 2023
- [Community Tool Box](#), University of Kansas, 2025
- [Describing Your Community, Collecting Data, Analyzing the Issues and Establishing a Road Map for Change](#), Community Anti-Drug Coalitions of America, National Coalition Institute, 2018
- [Guide to Prioritization Techniques](#), National Association of County & City Health Officials, n.d.

SYSTEMS THINKING APPROACHES AND TOOLS – The following resources can help you better understand the interconnectedness of components within a system, and explore some of the approaches and tools used in systems thinking.

- [The Iceberg Model](#), Population Health Innovation Lab, Public Health Institute, 2021
- [The 5 Whys](#), Lean Enterprise Institute, 2025 [Causal Loop Construction: The Basics](#), The Systems Thinker, 2018
- [Network Mapping @ A Glance](#), Healthy Communities Consortium, 2011
- [Systems Thinking Toolkit](#), FSG, 2017
- [Systems Tool Matrix](#), FSG, 2016
- [Actor Mapping](#), FSG, n.d.
- [A Mini-Primer of Critical Systems Heuristics](#), Werner Ulrich, 2023
- [Power analysis](#), Better Evaluation, Global Evaluation Initiative, 2024

RESOURCES TO COLLECTIVELY IDENTIFY CHALLENGES – Here are some resources to support community engagement as well as the assessment of community needs.

- [Community Engagement Resources](#), Municipal Research and Services Center, 2025
- [Community Engagement Toolkit](#), Collective Impact Forum, 2017
- [The Community Tool Box](#), Center for Community Health and Development, University of Kansas, n.d.
  - [Conducting Surveys](#)

- [Conducting Focus Groups](#)
- [Conducting Public Forums and Listening Sessions](#)
- [Community-based Participatory Research \(CBPR\)](#)
- [NCFH Community Asset Mapping Guide](#), National Center for Farmworker Health, 2021
- [Community-based Participatory Research: A Partnership Approach for Public Health](#), Region V Public Health Training Center, 2018

#### ADDITIONAL RESOURCES

- [What is Lived Experience?](#), Assistant Secretary for Planning and Evaluation, HHS, 2022
- [Equity ECHO Session 1: Knowledge is Power: Examining the Systemic Throughline from Root to Reality](#), Rural Institute, 2023
- [Where the Sidewalk Ends: The Historical Impact of Population Health Disparities and Finding a Path Toward Equity](#), Region IV Public Health Training Center, 2023
- [Framing Fundamentals](#), FrameWorks Institute, 2025
  - [What's in a Frame?](#), 2020
  - [Fact Sheet: 6 Things to Know about Cultural Mindsets](#), 2024

#### Section 2 - Phase 3

COMPETENCIES IN LEARNING DESIGN – These resources provide an overview of why competencies improve learning and widely recognized competency frameworks for the public health workforce.

- [What is Competence? A Shared Interpretation of Competence to Support Teaching, Learning and Assessment](#), Cambridge University Press and Assessment, 2021
- [Core Competencies for Public Health Professionals](#), The Council on Linkages Between Academia and Public Health Practice, 2021
- [Adapting and Aligning Public Health Strategic Skills](#), de Beaumont Foundation, 2021

LEVERAGE POINTS IN SYSTEMS – These resources offer suggestions and stories to help identify crucial leverage points, in which systems change results from highly specific action.

- [Thinking in Systems](#), CDC Polaris, 2024
- [Finding Leverage – The Power of Systems Thinking with Chris Soderquist on Vimeo](#), 2014
- [Systems Thinking Coaching](#), New England Public Health Training Center, 2019

POLICY SURVEILLANCE – Here are some resources that provide an overview of policy surveillance and provide some legal data on public health topics.

- [Policy Surveillance and Legal Epidemiology: Tools for Public Health Advocacy](#), Region V Public Health Training Center, 2020
- [Law Atlas](#), Center for Public Health Law Research, Temple University Beasley School of Law, n.d.

UNDERSTANDING AUDIENCE PERSPECTIVES - These resources offer advice on framing and understanding different audiences.

- [Frameworks Institute](#)

## Section 2 - Phase 4 and 5

Resources for Phases 4 and 5 were combined to support LASC implementation and evaluation and how to reflect on the data or evidence collected. In addition to these, remember to check out what your Regional PHTC and the PHTC Network offers!

CHANGE LEADERSHIP – The following resources will help you explore principles of change leadership.

- [Leading Change](#), John Kotter, 2012
- [Switch: How to Change Things When Change Is Hard](#), Chip Heath and Dan Heath, 2010

IMPLEMENTATION PLAN – This resource offers a brief description of implementation plans and links to additional resources.

- [What is an Implementation Plan?](#), Build Up Project, University of North Carolina, n.d.
- [ChangeABLE: A Workshop in a Box](#), ChangeABLE, LLC, n.d.

COLLABORATION – These resources provide guidance on building and maintaining partnerships.

- [Chapter 5: Section 5 - Coalition Building I: Starting a Coalition](#), Community Tool Box, Center for Community Health and Development, University of Kansas, n.d.
- [Asset-Based Community Development Institute Resources](#), DePaul University, n.d.
- [What is Asset Based Community Development \(ABCD\)](#), Collaborative for Neighborhood Transformation, n.d.

TRAINING DATABASES FOR ENVIRONMENTAL SCANS – The following resources are great starting points for conducting environmental scans to see what trainings already exist that may support your Learning Plan.

- [Public Health Learning Navigator](#), National Network of Public Health Institutes, n.d.
- [TRAIN Learning Network](#), Public Health Foundation, n.d.
- [MCH Navigator](#), National Center for Education in Maternal and Child Health, Georgetown University, n.d.
- [CDC Learning Connection](#), Centers for Disease Control and Prevention, 2024
- [SAMHSA Technical Assistance and Training Directory](#), Substance Abuse and Mental Health Services Administration (SAMHSA), n.d.
- [NACCHO Training Programs](#), National Association of County and City Health Officials (NACCHO), n.d.
- [ASTHO Training and Resources](#), Association of State and Territorial Health Officials (ASTHO), n.d.
- Other state or local resources that might provide tailored trainings (e.g., professional associations, Public Health Institutes, foundations, academic institutions)

INSTRUCTIONAL DESIGN – Here are some resources that introduce key concepts for creating learning for adults.

- [Inclusive ADDIE: Initial Considerations for DEI Pedagogy](#), EDUCAUSE Review, 2022

- [Everything You Needed to Know About Adult Learning Theory](#), New England Institute of Technology, 2021
- [CDC Quality Training Standards](#), Centers for Disease Control and Prevention, 2024
- [Exploring the Ethos of Project ECHO: How “All Teach All Learn” Encourages Virtual Engagement](#), National Network of Public Health Institutes, 2024
- [Digital Accessibility Guide](#), Rocky Mountain Public Health Training Center, 2024

EVALUATION – Here are a variety of resources related to evaluation planning, process evaluation, and outcome evaluation (including mid-level outcomes such as policy and systems change).

### General Evaluation Planning

- [The Community Tool Box](#), Center for Community Health and Development, University of Kansas, n.d.
  - [Developing an Evaluation Plan](#)
  - [Choosing Evaluators](#)
- [Elements of an Evaluation Plan](#), Agency for Healthcare Research and Quality, 2023
- [Mobilizing for Action through Planning and Partnerships \(MAPP 2.0\)](#), National Association of County Health Officials, updated in 2023
- [Focus the Evaluation Questions and Design](#), Centers for Disease Control and Prevention, 2024
- [CDC Evaluation Framework](#), Centers for Disease Control and Prevention, 2024

### Process Evaluation

- [PDSA: Plan-Do-Study-Act](#), Minnesota Department of Health, 2022
- [Continuous Quality Improvement \(Self Paced-CE\)](#), Region V Public Health Training Center, 2024
- [Evaluating Systems Change Results: An Inquiry Framework](#), Tamarack Institute, 2019.
- [Policy Process Evaluation for Equity](#), ChangeLabSolutions, n.d.

### Short-Term Outcome Evaluation (Knowledge, Skills, Attitudes)

- [The Kirkpatrick Model](#), Kirkpatrick Partners, n.d.
- [How to Ask About Attitude Change](#), SurveyMonkey, n.d.
- [The Art of Focused Conversation: More Than 100 Ways to Access Group Wisdom in Your Organization](#), Stanfield, R. B., & Nelson, J. (Eds.), 2024
  - [The Art of Focused Conversation](#), ICA Associates Inc., n.d. (This brief article discusses ORID questions.)

### Mid-Term and Long-Term Outcome Evaluation

Evaluating (organizational) culture change

- [How to Know if Your Culture Change Strategy Is Working](#), Center for Creative Leadership, 2018.
- [Public Health Workforce Interests and Needs Survey \(PH WINS\)](#), de Beaumont Foundation, n.d.

- [Measuring Mindset Shifts and Evaluating Mindset Shift Efforts](#), FrameWorks Institute, 2020.

#### Evaluating for health equity outcomes

- [Evaluation Considerations for Programs Designed to Improve Health Equity](#), Rural Health Information Hub, 2022.
- [Health Equity Guide](#), Human Impact Partners, n.d.
- [Measuring the How Along with the What](#), ChangeLab Solutions, n.d.

#### Evaluating policy, systems, and environmental change

- [Law Atlas](#), Center for Public Health Law Research, Temple University Beasley School of Law, n.d.
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# Applying the Learning Agenda for Systems Change

## Diabetes Challenge Overview

This one-page overview provides a snapshot of the diabetes challenge addressed by the LASC team. It outlines how the team identified a complex challenge, refined it, drafted a desired future state, selected an adaptive subfactor to focus on, and refined their community challenge using the chosen adaptive subfactor. The overview captures key decisions made during Phase 2, including Steps 1c-1d, 2c, and 3.

### Step 1c. Adaptive/complex community or organizational challenge:

High rates of uncontrolled Type 2 diabetes

### Step 1d. Refined complex community challenge:

There are high rates of uncontrolled diabetes among Black and Brown individuals in ABC community. This results in missed days of work and preventable visits to the emergency room causing economic hardship and lower overall well-being for individuals with uncontrolled diabetes.

### Step 1d. Vision statement or desired future state:

All individuals in the community with diabetes have their diabetes well-managed, thus avoiding missed days of work and preventable visits to the emergency room. Individuals in the community experience greater economic stability; higher overall well-being for individuals with uncontrolled diabetes.

### Step 2b. Selected adaptive subfactor:

County hasn't budgeted money for parks in this community.

### Step 3. Refined community challenge with selected adaptive subfactor:

There are high rates of uncontrolled diabetes among Black and Brown individuals in the community. This is due in part because there is a lack of accessible and safe recreational greenspace to play and exercise because the county hasn't budgeted money for parks in the community. This results in missed days of work and preventable visits to the emergency room causing economic hardship and lower overall well-being for individuals with uncontrolled diabetes.

### Step 3. Time-bound desired state:

The county has increased the funding over the next 10 years for recreational parks and greenspaces in this community to provide parity with other more well-resourced areas of the city.

## Applying the Learning Agenda for Systems Change

### Diabetes Challenge Example

This sample worksheet illustrates how teams might move through the Learning Agenda for Systems Change blank worksheet. Different challenges and teams will have their own unique approach to this work, so use your judgment to identify which parts of the example are most helpful for your process.

Background: In this fictitious example, the team completing the Learning Agenda process is interested in addressing the rates of uncontrolled Type 2 diabetes (T2D) in their county, especially among communities of color who are experiencing unequal and unjustly higher rates.

### Phase 1: Foundational Readiness Planning

Step 1: Consider Elements of Team Functioning

#### *Step 1a. Build and strengthen an effective team*

As you begin your LASC work, consider who else has an interest in this issue. Start by conducting an environmental scan to identify organizations, groups, or individuals who may have an interest in the issue and those who may be able to influence the well-being of the community.

**Example:**

Name of Individual, Group or Organization	Describe their Interest in the Issue	What assets and resources might they have to contribute to working on the issue?
American Diabetes Association	Nonprofit that Leads Diabetes Awareness efforts, Advocacy, Equity, Education and Policy initiatives, Diabetes Research.	Raises funds, awards grants, collaborates to create policies for equity in medicine and insurance access.
State Health Department Diabetes Program - <i>Debbie is on our LASC team</i>		
State/Local Diabetes Prevention Coalition	Goal is to improve diabetes best practices and enhance diabetes education and research	Wide network - Coalitions typically have representatives from different sectors and/or organizations.

Local Diabetes Support Group	Provide emotional, educational and social support to people with diabetes. Represent concerns/interests of people with diabetes to external groups.	Has awareness of local issues, assets, and community strengths, as well as the assets of lived experience and local trust. This group is typically involved in local implementation.
American Heart Association (AHA)	AHA lists diabetes as a risk factor for cardiovascular disease, seeks to mitigate cardiovascular events through advocacy, education, research, treatment and lifestyle intervention; mission includes physical activity.	Lots of expertise, connections, and potential funding streams.
Local Parks and Recreation Department - <i>Raul is on the LASC team and is part of the Diabetes Prevention Coalition</i>	They care about the issue and are responsible for planning and maintaining activities, services, outdoor spaces and facilities that support community wellness.	Influence - city or park department boards and commissions control how money is allocated
Community Health Centers	Treat patients with diabetes and are committed to delivering equitable, accessible care.	Established trust with community members who are directly affected by diabetes.
Community Members with Type 2 Diabetes	Directly impacted by the issue	Provide lived experience and critical insight into treatment and prevention effectiveness, challenges and opportunities
Certified Diabetes Educator (CDE) - <i>Crista is on our LASC team and will help us recruit a community member living with T2D</i>	Help patients with diabetes manage the disease through education on nutrition, lifestyle changes, and insulin use.	
Workplace Wellness Programs	Employers interested in managing employee health care costs through workplace-based diabetes prevention and care programs.	May provide low-cost benefits or incentives for participation in specific lifestyle programs
Public and Private Health Plans (Payers)	Define and provide payment structures for supplies and services	

Academic Research Centers (Health Centers and Educational Institutions)	Lead research that contributes to and addresses care, access, disease management, prevention, treatment and health outcomes	Research expertise and data
Local Pharmacies	Promote equity by facilitating access, to medications, devices and other tools and equipment	
Nutrition Groups	Provide education about healthy food options to prevent or control disease	
Amputation Prevention Alliance (ADA subcommittee)	Concerned about high rates of amputations among people with diabetes and prevalence among people of color.	Knowledge of diabetes - Alliance works to "advance purposeful, equitable and necessary legislation and policy change to protect patients from unnecessary amputations.
National Kidney Foundation	Mission to advance kidney equity through education, prevention initiatives, organ donation and transplantation equity	
Faith-Based Organizations	Provide community support and health education, often trusted in underserved populations.	Local influence, volunteer base, venues for outreach.

*Step 1b. Establish team facilitation and group norms*

Develop a team charter to outline the decision-making process, roles, and responsibilities and establish guidelines for addressing leadership changes. This charter should detail key aspects of team facilitation and group norms.

**Example:**

Team Charter	Notes
<p><b>Coordination Lead</b> Who will serve as the coordination lead for the Learning Agenda for Systems Change team? Is there 1 organization or individual who will take the lead for setting up meetings, tracking decisions, or handling other logistics?</p>	<ul style="list-style-type: none"> <li>- The local public health department will serve as the coordination lead, with 1-2 representatives taking charge.</li> <li>- These individuals will be responsible for organizing meetings, tracking decisions, managing agendas, and overseeing logistics.</li> <li>- They will ensure regular updates and smooth communication between all LASC members.</li> </ul>
<p><b>Work Implementation</b> Who is responsible for implementing the work? Which individuals or organizations do you anticipate being involved with the different components of implementing the Learning Agenda?</p>	<ul style="list-style-type: none"> <li>- <b>Local Public Health Department:</b> Coordinates community outreach and diabetes prevention programs. Leads the implementation of public health campaigns, relevant trainings, and ensures the work aligns with public health guidelines.</li> <li>- <b>Community Health Center:</b> Handles direct care and outreach to at-risk populations. Assists with promoting public health campaigns.</li> <li>- <b>Parks and Recreation:</b> Provide facilities and activities for physical wellness programs and community events.</li> <li>- <b>Local Diabetes Support Group:</b> Engage in direct community support, local advocacy, and education.</li> <li>- <b>State Diabetes Prevention Coalition:</b> Plays a key role in standardizing and disseminating diabetes prevention practices across the state. Facilitates collaboration between different sectors (healthcare, education, policy).</li> <li>- <b>Certified Diabetes Educator (CDE):</b> Provides expert guidance on diabetes management, patient education, and lifestyle coaching. Helps develop education materials and lead community workshops.</li> </ul>
<p><b>Decision-Making Process</b> How will the team make decisions? What process will be used (e.g., consensus, majority vote)?</p>	<ul style="list-style-type: none"> <li>- The team will aim to make decisions using consensus-based decision-making to foster collaboration and shared responsibility.</li> <li>- For time-sensitive issues, a majority vote will be employed if consensus cannot be reached.</li> </ul>

	<ul style="list-style-type: none"> <li>– Regular meetings will involve status updates, decision tracking, and action planning, ensuring that decisions are clearly documented and communicated.</li> </ul>
<p><b>Timeline</b> What is the timeline for completing the work? Are there any external deadlines or timelines you want to be aware of?</p>	<ul style="list-style-type: none"> <li>– The LASC will be implemented over an 18-month period, with key milestones:</li> <li>– <b>3 months:</b> Initial data collection and environmental scan complete. Identify the challenge and time-bound desired state.</li> <li>– <b>6 months:</b> Outline the logic model and create learning plans.</li> <li>– <b>9-16 months:</b> Implementation of learning plan, evaluation of learning opportunities</li> <li>– <b>16-18 months:</b> Evaluate process and progress</li> </ul>
<p><b>Communication &amp; Coordination</b> How will the multiple partners implementing the work stay connected and in communication with each other?</p>	<ul style="list-style-type: none"> <li>– The team will use a shared online platform (i.e., Google Drive) for file sharing, meeting notes, and tracking action items.</li> <li>– Biweekly meetings will be held with all team members during the initial phases of data collection, identifying the challenge, and outlining the logic model.</li> <li>– Subcommittees will meet biweekly to further flesh out learning plans according to topic area/expertise and share updates with the larger team at monthly meetings.</li> </ul>
<p><b>Leadership Turnover</b> What will the team do in the event of leadership changes?</p>	<ul style="list-style-type: none"> <li>– If leadership changes occur, the local public health department will appoint an interim lead until a permanent replacement is identified.</li> <li>– All participating groups/organizations will designate a backup contact to maintain continuity if leadership transitions occur.</li> <li>– Key documents, meeting minutes, and work plans will be stored on the shared platform to ensure continuity and smooth transitions for new leaders.</li> </ul>

*Step 1c. Develop plans to implement and evaluate process*

Ensure the team has a clear understanding of available resources to support the LASC process, including human, financial, and leadership support.

**Example:**

- Director of the local health department is very supportive of this effort
- Staff at the health department are working closely with the local diabetes coalition, which has many organizations involved. Many organizations are interested in helping with implementation.
- The health department has some funding supporting systems transformation work that can support staff time
- Several organizations have some money available to support training - which could support implementation of learning efforts that come from the LASC planning effort.
- Many organizations involved with the coalition have subject matter expertise to contribute to the effort.
- Some organizations involved in the coalition have good relationships with policy makers and have some experience with policy, systems, environmental change efforts.
- The health department has an evaluator on staff who will support this project.

*Step 1d. Assess elements of team functioning*

Now, it's time to assess the team. Use the rubric below to evaluate the team across key elements of team functioning.

Early		Established		Strong	
1	2	3	4	5	6
Not yet or learning stage	Planned but not started or in initial/pilot stages of implementation	Working towards this but not fully achieved	Fully achieved	In place with evidence of its use (e.g., policies, procedures, robust evaluation plan)	Practices are sustainable and ongoing and may be shared with others as "best practices"

**Example:**

Elements of Team Performance	Team's Score (1-6)
1. Our team has the diversity of strengths, expertise, perspectives, and experiences needed to do this collective work.	4
2. Our team has team facilitation approaches and group norms in place.	4
3a. Our team has leadership and key sponsor support.	4
3b. Our team has experience creating implementation plans that include resource allocation.	5
3c. Our team is prepared to create an evaluation plan for the LASC process.	5
<b>Total</b>	22

This score will be added to the total score later.

Step 2: Consider four Foundational LASC Principles

*Step 2a. Equity*

Identify and discuss the benefits, concerns, potential opportunities, and risks of focusing on equity in your organization and community. Develop a common understanding and shared vocabulary around lived experiences regarding equity and inequities, justice and injustices.

**Example:**

- Team members are confident in our understanding of diversity, equity, and inclusion (DEI). There is mixed understanding of "liberation" and how that applies to this work.
- The "structural determinants" is new terminology for some group members.
- The team is in agreement that systems change is needed and is eager for a process like the LASC to help us work through it.
- We are pretty confident in our understanding of history and past inequities... but we also recognize we might not know what we don't know...

*Step 2b. Systems thinking*

Reflect on the team's understanding and experience with systems thinking and discuss gaps, strengths, and opportunities for improvement.

**Example:**

- About half the group is confident in understanding systems thinking.
- Some group members have a lot of experience with changing systems through policy change.

- Some team members have experience doing root cause analyses as part of organizational Quality Improvement work.
- Some of us are clear on the theory but haven't had a lot of practice experience.

#### *Step 2c. Engagement and relationship building*

Reflect on your team's quality, history, and depth of existing engagement with team members, across the organization, and/or community to gauge gaps, strengths, and opportunities for improvement.

#### **Example:**

- The team's work with the diabetes coalition has provided good experience engaging with lots of different partners and people who care about the issue.
- The team has closer connections with organizational partners... and not as much with individuals living with diabetes who may also be facing challenges such as poverty, lower education levels, or who have experienced racism and discrimination. This is an area of growth for us - we will need to connect more with groups partnering with and serving these individuals directly.

#### *Step 2d. Leadership*

Collectively create a statement of the intent and purpose of the LASC process and ensure that the team clearly understands the differences between transactional and transformational change.

#### **Example:**

Our Learning Agenda for Systems Change team intends to undertake a process to authentically seek out and understand diverse perspectives so that we can identify and address the issues at the root of inequity related to uncontrolled Type 2 diabetes. Our team will use this understanding to work collectively toward a shared vision of sustainable change.

*Step 2e. Assess team's readiness related to the four Foundational LASC Principles*

Now, it's time to assess the team again. Use the rubric below to evaluate the team's readiness related to the four foundational LASC principles.

Early		Established		Strong	
1	2	3	4	5	6
No work yet or learning stage	Planning not started or in initial/pilot stages of implementation	Working towards this but not fully achieved	Fully achieved	In place with evidence of its use (e.g., policies, procedures, robust evaluation plan)	Practices are sustainable and ongoing and may be shared with others as "best practices"

**Example:**

Four Foundational LASC Principles	Your Team's Score
4. Our team can define and explain the importance of equity and ensure that it has a common understanding and shared vocabulary regarding equity, inequities, justices, and injustices.	3
5. Our team understands systems thinking and has tools and processes in place to implement systems thinking initiatives.	3
6. Our team has engaged and built authentic relationships with organizations, partners, and the community needed to do this work.	2
7. Our team has effective leadership in place to work with the group to create a statement of purpose for the LASC.	3
<b>Total</b>	11

This score will be added to the total score later.

Step 3: Reflect on your readiness score and next steps

*Step 3a. Add up your LASC Readiness Assessment score*

Now it's time to add up the total scores from Steps 1d and 2e to **calculate the team's overall readiness assessment score**. This number should range from 9 to 54.

**Example:**

Overall LASC Readiness Assessment score:

<b>33</b>
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Score	Readiness for Systems Change and Health Equity
9-18	Early Readiness
19-36	Established Readiness
37-54	Strong Readiness

Discuss the implications of the team's overall readiness score and identify clear next steps for improvement.

**Example:**

Trainings and Resources	Work to Increase Your Team's Readiness	Decision About Moving Phases 2-5
<p>Members of our team will seek to increase our own understanding of:</p> <ul style="list-style-type: none"> <li>- Justice</li> <li>- Liberation</li> <li>- Structural determinants of health</li> <li>- Systems thinking tools</li> </ul>	<p>We want to extend our networks to groups who are closely and directly connected with individuals living with Type 2 diabetes who have direct experience with poverty, unemployment, discrimination, or other factors compounding their health outcomes.</p>	<p>With increased learning and outreach to other groups, we feel we are ready to move forward with the LASC process.</p>

## Phase 2: Define Challenge & Create the Vision

Step 1: Identify community or organizational challenges

### Step 1a. *Gather existing health and equity assessment data*

Gather data on demographics, health disparities, economic indicators, and existing programs or initiatives within the community. It's important to gather and review data from multiple sources to cross-verify and gain a comprehensive understanding of the community's strengths, challenges, opportunities, and threats.

#### Example:

Questions you want to answer about your topic area - information about the community to get a sense of its strengths, challenges, opportunities, and threats	Sources you can find information	Notes/Findings
What are the priority health or safety concerns?	<ul style="list-style-type: none"> <li>• State Health Department Reports</li> <li>• American Diabetes Association (ADA) Reports</li> <li>• National Diabetes Surveillance System (CDC)</li> </ul>	<p>Health disparities among communities of color and low-income groups. High rates of complications and amputations. Delayed care and limited access to preventive services contribute to poor health outcomes.</p>
Who is impacted?	<ul style="list-style-type: none"> <li>• Community Health Needs Assessment (CHNA), 2023</li> <li>• County Health Rankings &amp; Roadmaps</li> <li>• State Diabetes Prevention Coalition</li> <li>• Youth Risk Behavior Surveillance Systems (YRBSS)</li> </ul>	<p>Type 2 diabetes affects 12% of the local population. African Americans (19%) and Hispanic/Latino adults (16%) are disproportionately impacted. Older adults (ages 45-65, 17%) and those over 65 (22%) are most affected. Youth (ages 10-18) now account for 5% of diagnosed cases, a 25% increase over the past five years, with rates especially higher among Hispanic/Latino (8%) and African American (7%) youth.</p>
How are they impacted?	<ul style="list-style-type: none"> <li>• State Health Department Report, 2023</li> <li>• CDC Social Vulnerability Index</li> <li>• Community Health Centers reports</li> </ul>	<p>African American and Hispanic populations experience higher rates of diabetes complications, such as amputations and kidney disease.</p>

		Diabetes-related hospitalizations are higher among uninsured individuals and low-income populations.
What is the impact on the community or system as a whole?	<ul style="list-style-type: none"> <li>American Diabetes Association (ADA) Reports</li> <li>Local Public Health Department</li> <li>National Diabetes Statistics Report</li> </ul>	<p>The economic burden of diabetes is \$3.4 billion annually in the state.</p> <p>Diabetes-related absenteeism costs local employers \$10 million annually.</p> <p>25% of residents delay care due to cost, exacerbating complications and health outcomes.</p>
Who is actively working on the problem? What initiatives are currently implemented?	<ul style="list-style-type: none"> <li>State Diabetes Prevention Coalition</li> <li>American Diabetes Association (ADA)</li> <li>Local Community Health Centers</li> <li>Nonprofits</li> <li>Local Public Health Department</li> <li>State Health Department Initiative</li> <li>Employer-based wellness programs</li> </ul>	<p>The ADA is leading national efforts for diabetes awareness, advocacy, and policy initiatives.</p> <p>Local community health centers provide diabetes education and care to low-income groups.</p> <p>Local Diabetes Prevention Program (DPP) for lifestyle interventions.</p> <p>Mobile health clinics offer screenings and diabetes management.</p> <p>Some employers provide biometric screenings and diabetes management programs.</p>
What asset-based view of the community isn't included in this data?	<ul style="list-style-type: none"> <li>Local Nonprofit Organizations</li> <li>Community leaders</li> <li>Faith-based organizations</li> </ul>	<p>Community resilience and grassroots efforts around healthy food access are not fully captured.</p> <p>Faith-based organizations often provide social support to at-risk populations and could be a valuable partner in expanding diabetes prevention efforts.</p>

Step 1b. Ensure that a comprehensive approach is used to identify the challenge

Identify and coordinate separate conversations with two individuals that are not in public health or healthcare and are closely connected with the community to talk to get their perspective on the challenge(s) facing the community. For example, these individuals may be connected with a local chamber of commerce, faith-based organization, charitable food system, or they may be an individual living with T2D.

**Example:**

**Conversation 1: Housing Supervisor**

Questions	Notes
What would you say are the primary challenges facing the community? Does the community agree that is the primary challenge?	Economic hardship: "Families struggling to make ends meet" "Increased number of people with diabetes getting sicker and not able to work" Increasing evictions
Who is most impacted by the problem?	Lower SES (socioeconomic status) Black and Brown individuals with poorly controlled diabetes
How are they impacted?	Poor Health Loss of Income Unstable Housing Food insecurity Chronic Stress Lack of accessible greenspaces and parks or poorly maintained parks
Why is this challenge occurring? What causes it? What keeps the problem in place?	Lack of affordable health care, leading to delayed diagnosis and treatment People don't go to doctors like they should/Don't know how to take care of themselves Loss of income for taking time off from work or getting sick
What policies, practices, rules, or regulations keep the challenge in place, or make the challenge worse?	Little to no healthy food options Improper zoning laws and land use policies - impeding healthy food options Lack of favorable housing policies (e.g., no eviction prevention) Limited affordable housing and jobs with benefits Unfavorable employment policies for individuals with chronic health issues
Who is causing the problem or who plays a role in keeping the challenge in place?	Landlords Advertisers (e.g., fast food) Fast Food retailers Local government authorities

What policies, practices, rules, or regulations are positively impacting the challenge?	Some recent local government efforts to expand affordable housing and food assistance programs are starting to help but remain insufficient in scope
Who is currently involved in trying to address the problem?	Grassroots advocacy coalitions Social services City council Medical community
What assets exist in the community that should be considered when addressing the challenge?	Community advocacy groups Local food banks and pantries Active faith-based organizations providing support
What outcome would the community find of value if the challenge were addressed?	Concerns and high costs related to health care could be reduced or eliminated For families living with many stressors, being able to minimize or eliminate one would be valuable and positively impact other areas of their lives.
How would you define success? What would things look like if the challenge was addressed? What would be different?	Fewer people with diabetes and related complications Community members are more knowledgeable about diabetes and how prevent/manage it Better housing policies and resources to help people avoid evictions and homelessness More affordable healthcare and medication options for low-income families More fresh food retailers and farmer's markets are available Better employment opportunities and sick leave policies More social services to assist with housing emergencies and income gaps

**Conversation 2: Middle School Teacher**

Questions	Notes
What would you say are the primary challenges facing the community?	Increased school absenteeism Poor school performance Increased # of children with health issues including Type 2 diabetes and obesity
Who is most impacted by the problem?	Children from lower-income Black and Brown families
How are they impacted?	Less active Poor test performance Increasing obesity rates Not advancing as well in school due to absences
Why is this challenge occurring? What causes it? What keeps the problem in place?	Children eating highly processed foods No place for children to play in their neighborhoods or lack of safe play areas Limited opportunities for active/outdoor learning High diabetes prevalence rates in families Parents don't have resources to take care of themselves and families Lack of fresh fruits and vegetables at home or school Parents with health issues; job and housing instability Instability at home
What policies, practices, rules, or regulations keep the challenge in place, or make the challenge worse?	Lack of funding for after school and tutoring programs Lack of nutrition subsidy programs Lack of policies about fast food, grocery store zoning Lack of funding for investment in creating more green space and parks Few good employment opportunities Inadequate health care access
Who is causing the problem or who plays a role in keeping the challenge in place?	State Education authorities Housing authorities Local government
What policies, practices, rules, or regulations are positively impacting the challenge?	School meal programs with some funding for nutrition education and healthier meals
Who is currently involved in trying to address the problem?	Child advocacy groups County Assistance Office Food Assistance

	Health Department School Nutrition Association Social service agencies Medicaid
What assets exist in the community that should be considered when addressing the challenge?	Community engagement through parent-teacher organizations Local nonprofit food assistance Grassroots advocacy for better school nutrition and parks
How would you define success? What would things look like if the challenge was addressed? What would be different?	Children's health and wellbeing prioritized in the community SafetyNet programs and trainings are in place to identify children who may be having issues Funding exists for afterschool and tutoring Community health promotion programs are in place

With this new insight from others within the community, critique the existing data previously gathered and fill in any additional gaps in the team's understanding.

**Example:**

Based on the additional insight gathered from community sources...	Sources for information	Notes/Findings
What additional data do you need on any of the social determinants of health? ( <a href="#">Resource</a> )	Transportation Authority Police data City Planner, EPA data Workforce Commission	Public transportation is lacking in the lower-income areas. About 60% of families struggle to get to grocery stores or healthcare appointments. There's a noticeable trend of higher offenses in low-income neighborhoods. Many parents shared that they avoid letting their kids play outside or go to parks due to safety concerns –around 70% of them feel this way. Zoning laws have not been updated in over 20 years, limiting the development of parks and greenspaces. Only 15% of the community has access to a park within a 10-minute walk, and existing greenspaces often lack proper maintenance.

		Local employment data shows a 25% unemployment rate among families with low educational attainment, impacting their ability to afford healthy food and healthcare.
What additional data you need about specific populations within your community (e.g., disabled veterans, migrant farmworkers, transgender young adults, etc.)?	Social Service	Migrant families face significant barriers, especially with language and cultural issues. About 40% of the kids in these families are overweight or obese.
What biases (intentional or unintentional) might be present in your existing data and how it is presented?	Police data Social Service Housing Authority	Review of police records suggests a pattern of over-policing in communities of color, leading to distrust and reluctance to report crimes, which may skew crime statistics.  Eligibility criteria for social services often exclude families with undocumented members, resulting in underreported needs in the community. This gap leads to significant unaddressed health and food insecurity issues.  Historical analysis shows that discriminatory housing practices have led to long-term segregation, limiting access to quality schools and health services for Black and Brown communities. Current policies still reflect these disparities.
What additional data or historical context might you need on historic or current structural systems and policies (e.g., redlining, investments in education, transportation, etc.) that impact the challenge?  Have systems or policies changed, and if yes, how have they changed?	Library Community Action Groups Historical Societies Social service agencies Social research groups	Documentation reveals that funding for public infrastructure, including parks and schools, has historically favored affluent neighborhoods, leaving low-income areas underserved. Recent efforts to address this inequity are still in early stages.  Engagement with local advocacy organizations reveals ongoing campaigns for better zoning laws and

What information do you need to understand the role these systems and policies play in creating or sustaining injustices that have led to the community challenge?		increased funding for greenspaces, emphasizing the community's desire for safer play areas for children.
What patterns, if any, do you see among the contributors to this problem?		Low-income and minority communities are often overlooked, so they have less access to important things like transportation, healthcare, and safe places to play. Rules and funding often favor wealthier neighborhoods, leaving poorer areas with fewer resources.
What contributors to the problem are connected and how are they connected?		The lack of public transportation, outdated zoning laws, and over-policing are linked because they all limit access to basic services, create distrust in local government, and keep certain neighborhoods isolated. These issues, along with past unfair housing rules, make it harder for people in these areas to get a good education, healthcare, and safe spaces.

*Step 1c. Select an adaptive/complex challenge on which to focus*

Based on the research completed, what issue will the team focus on addressing?

**Example:**

High rates of uncontrolled Type 2 diabetes

*Step 1d. Create a challenge and vision statement for your Learning Agenda for Systems Change*

Now, based on the challenge identified above, refine it into a more specific challenge statement using the following prompt:

**Example:**

The problem of [health outcome or issue] in [specify community or population] results in [impact].

*There are high rates of uncontrolled diabetes among Black and Brown individuals in ABC community. This results in missed days of work and preventable visits to the emergency room causing economic hardship and lower overall well-being for individuals with uncontrolled diabetes.*

Then, flip the challenge to create the vision – the future state you want to see.

*All individuals in the community with diabetes have their diabetes well-managed, thus avoiding missed days of work and preventable visits to the emergency room. Individuals in the community experience greater economic stability; higher overall well-being for individuals with uncontrolled diabetes.*

Step 2: Gain a deeper understanding of the selected challenge

*Step 2a. Identify contributing factors and root causes using systems thinking approaches and tools*

What are the factors that contribute to or perpetuate the community or systems challenge you identified in Step 1? Ask yourself “Why is the situation in occurring?” “What are the factors that perpetuate this challenge?” Consider using the “5 Why’s” approach to peel back the layers of the problem.

**Example:**

<b>Factors</b>
There is a lack of fresh fruits and vegetables in the community
People with diabetes don't know when to take their medication
There is a lack of accessible and safe recreational parks and greenspace to play and exercise
It is not safe to walk outside due to crime and lack of sidewalks
Poverty and economic inequities: <ul style="list-style-type: none"><li>– Low-income households have to decide between buying food or medication</li><li>– Lack of public transportation to grocery stores, pharmacies, or local health clinics</li><li>– Insurance does not reimburse diabetes education</li></ul>
Chronic stress

There is easy access to and promotion of fast-food dining options
People with diabetes haven't been diagnosed
Limited access to/participation in food and nutrition assistance programs (e.g., SNAP, WIC, congregate meals, produce prescriptions, etc.)

*Step 2b. Build consensus to select a more adaptive contributing factor on which to focus*

Label the factor list "T" for technical or "A" for adaptive.

**Example:**

<b>Factors</b>	<b>T or A?</b>
There is a lack of fresh fruits and vegetables in the community	A
People with diabetes don't know when to take their medication	T
There is a lack of accessible and safe recreational parks and greenspace to play and exercise	A
It is not safe to walk outside due to crime and lack of sidewalks	A
Poverty and economic inequities: <ul style="list-style-type: none"> <li>– Low-income households have to decide between buying food or medication</li> <li>– Lack of public transportation to grocery stores, pharmacies, or local health clinics</li> <li>– Insurance does not reimburse diabetes education</li> </ul>	A
Chronic stress	A
There is easy access to and promotion of fast-food dining options	A
People with diabetes haven't been diagnosed	T
Limited access to/participation in food and nutrition assistance programs (e.g., SNAP, WIC, congregate meals, produce prescriptions, etc.)	A

Now, looking at the “A” (adaptive factors), pick one to focus on based on:

- The importance of the factor
- The partners engaged and working on this factor
- The alignment to LASC team members’ organizations’ missions
- The level of investment needed and assets available from multiple partners
- The opportunity for impact

**Selected Adaptive Factor:**

There is a lack of accessible and safe recreational parks and greenspace to play and exercise.

*Step 2c. Dive deeper into the selected contributing factor using systems thinking approaches.*

Consider the selected factor and ask, “why is this happening? Why is this contributing sub-factor continuing to exist?”

**Example:**

Sub-factors
County hasn't budgeted money for parks in this community
There is limited land available to develop into parks
There is a lack of ADA compliant infrastructure to accommodate people with limited mobility
The facilities are in disrepair and in need of structural improvements
Power structures/political determinants of health - Developers have great influence on county administrators/city planner (green space and parks do not make money and require ongoing resources to maintain)
Public transportation is not near parks or green spaces
City codes do not require sidewalks in residential areas; lack of walking paths or bike lanes
YMCA/YWCA are not located in lower-median income neighborhoods
schools do not have open recreation opportunities or shared use agreements; etc.

Label the sub-factor list “T” for technical or “A” for adaptive.

Sub-factors	T or A?
County hasn't budgeted money for parks in this community	A

There is limited land available to develop into parks	A
There is a lack of ADA compliant infrastructure to accommodate people with limited mobility	T
The facilities are in disrepair and in need of structural improvements	A
Power structures/political determinants of health - Developers have great influence on county administrators/city planner (green space and parks do not make money and require ongoing resources to maintain)	A
Public transportation is not near parks or green spaces	T
City codes do not require sidewalks in residential areas; lack of walking paths or bike lanes	T
YMCA/YWCA are not located in lower-median income neighborhoods	A
Schools do not have open recreation opportunities or shared use agreements	T

Now, looking at the “A” sub-factors, pick one to focus on based on:

- The importance of the factor
- The partners engaged and working on this factor
- The alignment to LASC team members’ organizations’ missions
- The level of investment needed and assets available from multiple partners
- The opportunity for impact

**Selected Adaptive Sub-factor:**

County hasn't budgeted money for parks in this community.

Now that the desired state the team is working towards has been identified, are there any additional organizations or groups that should be added to the Interested Holders List (see Phase 1)?

**Example:**

Name of Organization	Describe their Interest in the Issue or Desired State
Master Gardener's Association	Provide community outreach and education about gardening and landscaping - can help promote growing fruits and vegetables in small spaces
City Parks Alliance	Works with counties, cities, towns and other municipalities to promote funding and sustainable planning for parks and recreation in urban settings
NRPA (National Recreation and Park Association)	Provides training, funding and resources for planning and managing parks and recreational spaces

Step 3. Write the challenge and “time-bound desired state” statements

Write a more specific challenge statement that includes the adaptive sub-factor (or root cause) the team has chosen.

**Example:**

“The problem \_\_\_\_\_ [issue] exists because \_\_\_\_\_ [root cause] resulting in \_\_\_\_\_ [impact].”

There are high rates of uncontrolled diabetes among Black and Brown individuals in the community. This is due in part because there is a lack of accessible and safe recreational greenspace to play and exercise because the county hasn't budgeted money for parks in the community. This results in missed days of work and preventable visits to the emergency room causing economic hardship and lower overall well-being for individuals with uncontrolled diabetes.

Now that the team has a clear sub-factor challenge statement, the team will create a time-bound desired state. If the root cause (sub-factor) they're focusing on for the first iteration of their Learning Agenda was addressed, what would it look like?

**Time-Bound Desired State:** The county has increased the funding over the next 10 years for recreational parks and greenspaces in this community to provide parity with other more well-resourced areas of the city.

**Team Reflection**

Before moving onto Phase 3, take a moment to reflect on how the team's assumptions have been challenged throughout this process.

**Example:**

Given the community insights, it's clear that lack of access to safe parks and green spaces is an important factor in poor health outcomes. This challenge is more complex than we realized, as it's tied to transportation issues, limited funding, and outdated policies that keep some areas underserved.

We're now wondering how current zoning and funding policies are affecting access to health resources in low-income neighborhoods. Specifically, why hasn't there been more funding for parks and safe spaces, and what barriers are preventing new investments?

### Phase 3: Creating a Logic Model and Learning Plan

Step 1. Create a Logic Model of learning required for change

*Step 1a. Outline your logic model*

Create a Logic Model template with the time-bound desired state from Phase 2 Step 3 as the long-term outcome.

**Example:**

<b>Short-Term Outcome</b> Changes to knowledge, skills, attitudes	<b>Mid-Term Outcome</b> Changes to conditions	<b>Long-Term Outcome</b> Changes to systems
		The county has increased the funding over the next 10 years for recreational parks and greenspaces in this community to provide parity with other more well-resourced areas of the city.

*Step 1b. Identify the conditions needed for systems change – the mid-term outcomes*

Outline the mid-term outcomes in the Logic Model for changes needed in the following Six Conditions of Systems Change:

- Policy
- Practice
- Resource Flows
- Relationships/Connections
- Power Dynamics
- Mental Models

**Example:**

<b>Short-Term Outcome</b> Changes to knowledge, skills, attitudes	<b>Mid-Term Outcome</b> Changes to conditions	<b>Long-Term Outcome</b> Changes to systems
	<p><b>Policy:</b> Pass a tax that creates a new funding stream for the creation, renovation, and maintenance of greenspaces.</p> <p><b>Practice:</b> Establish a Community Advisory Board to make resource allocation recommendations for greenspaces.</p> <p><b>Resource Flows:</b> Change in funding mechanisms for greenspaces to allow businesses or nonprofits to apply to the city for funds to expand public-use greenspaces on land that they own.</p> <p><b>Relationships/Connections:</b> Increased connectivity and collaboration between agencies providing transportation services, ensuring wider access to existing greenspaces.</p> <p><b>Power Dynamics:</b> Coalition of individuals, organizations, and businesses created to advocate for parity in greenspace creation/renovation across the city. (Ensuring less-resourced neighborhoods have parity with well-resourced neighborhoods).</p> <p><b>Mental Models:</b> Perception that access to greenspace and recreation is a basic service deserved by everyone.</p>	<p>The county has increased the funding over the next 10 years for recreational parks and greenspaces in this community to provide parity with other more well-resourced areas of the city.</p>

*Step 1c. Identify the changes in knowledge, skill, and attitudes needed (short-term outcomes)*

To complete the short-term outcome column, the team should identify what knowledge, skills, and attitudes people will need to achieve the mid-term outcomes listed above.

**Example:**

<b>Short-Term Outcome</b> Changes to knowledge, skills, attitudes	<b>Mid-Term Outcome</b> Changes to conditions	<b>Long-Term Outcome</b> Changes to systems
<b>Knowledge:</b> Options for getting a tax passed (e.g., who passes it? Mill Levy vs. Property Tax vs other options)	<b>Policy:</b> Pass a tax that creates a new funding stream for the creation, renovation, and maintenance of greenspaces.	The county has increased the funding over the next 10 years for recreational parks and greenspaces in this community to provide parity with other more well-resourced areas of the city.
<b>Skill:</b> Advocate		
<b>Attitude:</b> Creating/improving access to greenspace needs ongoing, consistent investment		
<b>Have Knowledge About:</b> How current funding for greenspace works (where money comes from - who gets it - how it's used)	<b>Practice:</b> Establish a Community Advisory Board to make resource allocation recommendations for greenspaces.	
<b>Have Skill To:</b> Using persuasive communication to talk about the importance of greenspace		
<b>Attitude:</b> Benefit of communication, coordination, and collaboration		
<b>Knowledge:</b> How current funding for greenspace works (where money comes from - who gets it - how it's used)	<b>Resource Flows:</b> Change in funding mechanisms for greenspaces to allow businesses or nonprofits to apply to the city for funds to expand public-use greenspaces on land that they own.	
<b>Skill:</b> How governments can partner with the private sector to support public resources (e.g., greenspaces)		
<b>Attitude:</b> Benefit of a public/private partnership for greenspace funding		
<b>Knowledge:</b> What transportation resources and support services are available	<b>Relationships/Connections:</b> Increased connectivity and collaboration between	
<b>Skill:</b> Cross-sector collaboration		

<p><b>Attitude:</b> Linking transportation services to greenspaces promotes household and community well-being</p>	<p>agencies providing transportation services, ensuring wider access to existing greenspaces.</p>	
<p><b>Knowledge:</b> Current state of greenspaces throughout the city (where they are, where there are gaps, status of accessibility/disrepair)</p>	<p><b>Power Dynamics:</b> Coalition of individuals, organizations, and businesses created to advocate for parity in greenspace creation/renovation across the city. (Ensuring less-resourced neighborhoods have parity with well-resourced neighborhoods).</p>	
<p><b>Skill:</b> Power building strategies</p>		
<p><b>Attitude:</b> Access to quality greenspace has positive impact for community on improved health (resulting in lower medical costs, lost days of productivity, etc.), lower crime, family connectivity, etc.</p>	<p><b>Mental Models:</b> Perception that access to greenspace and recreation is a basic service deserved by everyone.</p>	
<p><b>Skill:</b> Persuasive communication</p>		
<p><b>Attitude:</b> Perception of access to greenspace as a matter of equal rights</p>		

Step 2: Create a Learning Plan

*Steps 2a-2e. For each change...*

- 2a. Identify competencies
- 2b. Prioritize audiences
- 2c. Draft learning objectives
- 2d. Identify learning conditions: length, dose, interaction with content
- 2e. Suggest learning modality

Now it's time to create a multi-layered Learning Plan using the template below. The team will work through the plan one column at a time, moving from left to right, following the instructions outlined in Section 2.

***The remainder of this document follows an excerpt of an example Learning Plan. Your Learning Plan and responses for Phase 4 and 5 may be more comprehensive.***

**Example:**

<b>2a: Competencies</b> <i>needed to achieve short-term outcome</i>	<b>2b: Audience(s)</b> <i>that need these competencies</i>	<b>2c: Learning Objectives</b> <i>- outcomes of the learning opportunities that would help the audience gain competency</i>	<b>2d: Learning Conditions</b> <i>that are needed to achieve the learning objectives</i>	<b>2e: Learning Modality</b> <i>that will provide the learning conditions to achieve the learning objectives and</i>	<b>Short-Term Outcome</b>
2.5.1: Identifies opportunities to influence policies...external to the organization	Coalition partners and interest holders who share common goal	<b>List</b> the options for getting a tax passed	<b>Length:</b> Short <b>Dose:</b> Once, with ability to revisit <b>Interaction:</b> Individual, with opportunity to ask questions	Webinar	<b>Knowledge:</b> Options for getting a tax passed (e.g., who passes it? Mill Levy vs. Property Tax vs other options)
2.2.1: Identifies individuals and organizations who can contribute to	Coalition partners	<b>Describe</b> the role different types of	<b>Length:</b> Short <b>Dose:</b> Once, with ability to revisit	Presentation during coalition meetings	

implementation of policies		organizations can play in tax initiatives	<b>Interaction:</b> Individual, with opportunity to ask questions		
	Parks & Rec	<b>Describe</b> the role the P&R Dept. can play in tax initiatives	<b>Length:</b> Short <b>Short Dose:</b> once, with opportunity to revisit <b>Interaction:</b> Individual, with opportunity to ask questions	Presentation during staff meeting	
2.1.2: Assess the feasibility and implications of policies...	Coalition partners	<b>Distinguish</b> the pros and cons of different tax options	<b>Length:</b> Medium <b>Dose:</b> Multiple discussion sessions <b>Interaction:</b> Collective, with opportunity to discuss/ debate	Presentation during coalition meetings	
2.5.2: Determines priorities for influencing policies	Coalition partners	<b>Recommend</b> the tax option that makes the most sense to pursue	<b>Length:</b> Medium <b>Dose:</b> Multiple discussion sessions <b>Interaction:</b> Collective, with opportunity to discuss/ debate	Series of facilitated discussions during coalition meetings	

Step 3: Build and maintain relationships with potential collaborators

Review the Interest Holders List to determine which individuals, groups, or organizations might support the development or hosting, provide the content expertise, or are connected to the intended audience for the learning opportunities in the Learning Plan. Reflect on the existing relationship the team has with each group and identify next steps.

**Example:**

Individual, Group, or Organization	Existing Relationship with LASC Team	Next step
Health department	<i>Strong.</i> Debbie is part of the LASC team.	Determine which learning opportunities they can help with and get them scheduled.
State Policy Institute	<i>Moderate.</i> State health department diabetes program staff have worked with them in the past.	Our team member, Debbie, will reach out to set an agenda for a planning meeting.
Local Government Commission	<i>Weak.</i> Would be good to have a relationship at some point as the group has access to influential policy makers and legislators	Our team member, Crista, will ask for a meeting to begin relationship-building. Crista will ask for a volunteer from the coalition to help prepare a background document to share and hopefully attend the meeting as well.
Parks and Rec	<i>Strong.</i> Raul is part of the LASC team.	Determine which learning opportunities they can help with and get them scheduled.
Regional Public Health Training Center	<i>Moderate.</i> Have participated in some of their trainings and are aware of the work they do.	Debbie from the health department will reach out through their website to set up a time for the LASC team to meet with them to discuss options for support.

*\*\*Remember: The remainder of this document follows an excerpt of an example Learning Plan. Your Learning Plan and responses for Phase 4 and 5 may be more comprehensive.*

## Team Reflection

Before moving onto Phase 4, reflect on the Logic Model and the proposed learning opportunities at a high level.

### Example:

- Working backwards from a time-bound desired state while developing the Logic Model was incredibly helpful! This approach helped guide our strategic thinking about what knowledge, skills, and attitudes needed to be addressed for different audiences.
- We feel confident that the learning opportunities outlined will lead to gradual but meaningful changes.
- Sharing the Logic Model with other interested holders and collaborators will also help bring them into the process and potentially connect it to other ongoing projects.

## Phase 4: Implement & Evaluate

Step 1: Leverage change leadership skills toward the time-bound desired future state  
Discuss and reflect on the key systems change leadership concepts.

### Example:

- We recognize the importance of leveraging change leadership skills to guide the team and interest holders toward our desired future state. Systems change is not just about new content or strategies; it's about fostering new ways of thinking and behaving, both individually and collectively. The process of clarifying the 'why' behind the change resonates deeply. If we hadn't identified a clear, desired future state, our team would have struggled with more resistance, division of thought, or hesitation when it comes to cross-sector collaboration.
- The process of co-creating a vision with the team and continuously revisiting the reasons for this transformation are both essential to adapting to change and keeping everyone motivated toward achieving this shared goal.
- The importance of communication must not be underestimated. It's not just about delivering the message once, but about reinforcing it in ways that resonate with the team's needs and styles. Ongoing communication ensures that everyone is aligned and able to contribute effectively as we work toward the desired state.

Step 2: Develop an Implementation Plan

### *Step 2a. Identify learning opportunity partners in a Collaboration Plan*

Using the chart created in Phase 3 Step 3, create a Collaboration Plan to outline which specific learning opportunities from the Learning Plan each potential collaborator can host or lead, along with the roles of others involved. For each learning opportunity, consider the following key roles: planning, design, host, recruitment, and subject matter expert(s).

**Example:**

<b>Learning Opportunity &amp; Objectives</b> Reference your Learning Plan from Phase 3 Step 2 ( <i>look at columns 3 and 5</i> )	<b>Role</b>	<b>Organization</b>
<b>Opportunity:</b> Webinar  <b>Objective:</b> List the options for getting a tax passed	Host learning opportunity	Regional Public Health Training Center
	Lead planning/design	LASC team and Regional Public Health Training Center
	Lead recruitment	LASC team and coalition members
	Provide subject matter expertise	Health Department
<b>Opportunity:</b> Presentation at Coalition Meeting  <b>Objective:</b> Describe the role different types of organizations can play in tax initiatives	Host learning opportunity	Health Department
	Lead planning/design	
	Lead recruitment	
	Provide subject matter expertise	Health Department, Department of Transportation, Parks & Recreation Department
<b>Opportunity:</b> Presentation at staff meeting  <b>Objective:</b> Describe the role Parks & Rec can play in tax initiatives	Host learning opportunity	Parks & Recreation Dept.
	Lead planning/design	
	Lead recruitment	
	Provide subject matter expertise	Parks & Recreation Dept. and State Policy Institute
<b>Opportunity:</b> Presentation at Coalition Meeting  <b>Objective:</b> Distinguish the pros and cons of different tax options	Host learning opportunity	Health Department
	Lead planning/design	State Public Health Association
	Lead recruitment	Health Department
	Provide subject matter expertise	State Public Health Association
<b>Opportunity:</b> Series of facilitated discussions  <b>Objective:</b> Recommend the tax option that makes the most sense to pursue	Host learning opportunity	Diabetes coalition steering committee
	Lead planning/design	
	Lead recruitment	
	Provide subject matter expertise	State Policy Institute

**\*\*Remember:** The remainder of this document follows an excerpt of an example Learning Plan. Your Learning Plan and responses for Phase 4 and 5 may be more comprehensive

*Step 2b. Determine budget in a Resource Plan*

Next, take time to reflect on the budget. This may cover the entire Learning Plan or individual learning opportunities.

**Example:**

Learning Opportunity: **Coalition Meeting (in-person)**

Item	Estimated Cost
Meeting space/venue	\$350 (local space)
Planning and design (staff time)	\$1,000 (health department staff, 20 hours)
Subject matter expertise	\$0 (government in-kind support)
Meeting Materials (e.g., prints)	\$150
Catering	\$250
Technology (AV setup, virtual meeting support)	\$250
Miscellaneous costs	\$100
Total	\$2,100

Learning Opportunity: **Coalition Meeting (virtual)**

Item	Estimated Cost
Webinar/meeting platform	\$250 (platform fee)
Planning and design (staff time)	\$750 (health department staff, 15 hours)
Subject matter expertise	\$300 (2 experts at \$150 each)
Meeting Materials (e.g., digital handouts)	\$50
Technical support	\$100
Follow-up Materials/Recording	\$50
Miscellaneous costs	\$50
Total	\$1,550

Video, Webinar, or Presentation (virtual)

Item	Estimated Cost
Webinar hosting platform	\$250 (platform fee)
Planning and design (staff time)	\$1,750 (health department staff, 25 hours)
Recruitment	\$500 (10 hours)
Subject matter expertise	\$0 (in-house expertise)
Promotion/Marketing materials	\$200
Technical support	\$100
Video/webinar production	\$2,000 (professional production)
Miscellaneous costs	\$100
Total	\$4,900

*\*\*Remember: The remainder of this document follows an excerpt of an example Learning Plan. Your Learning Plan and responses for Phase 4 and 5 may be more comprehensive*

*Step 2c. Develop specific learning opportunities in a Project Management Plan*

Then, develop a Project Management Plan for each individual learning opportunity. Each plan should detail all the following:

- Planning committee(s)
- Timeline
- Content development
- Learning opportunity logistics (e.g., location, registration, etc.)

**Example:**

Project Management Plan		
	Description	Notes
Planning Committee	<ul style="list-style-type: none"> <li>• Members: List 3-5 people involved, including LASC team, partners, subject matter experts.</li> <li>• Roles/Responsibilities: Define roles such as content lead, logistics coordinator, etc.</li> </ul>	<ul style="list-style-type: none"> <li>– Health department will coordinate all the logistics with the help of a coalition team member</li> <li>– The coalition team member will assist with communications to other coalition members</li> </ul>
Timeline	<ul style="list-style-type: none"> <li>• Key Dates: Identify important milestones (e.g., content drafts, event dates).</li> <li>• Notes: Are there any time-sensitive deadlines (e.g., legislation, policy changes)?</li> </ul>	<ul style="list-style-type: none"> <li>– Need to host coalition meeting several months before the legislation season starts to allow time for drafting, planning, and networking</li> <li>– May need 1-2 months to create and/or update the content beforehand</li> </ul>
Content Development	<ul style="list-style-type: none"> <li>• Existing Training: Can existing training meet the needs?</li> <li>• New Content: Notes on what new content needs to be developed.</li> <li>• Alignment: How will this content align with other learning opportunities?</li> </ul>	<ul style="list-style-type: none"> <li>– Some content from existing trainings may be used</li> <li>– Need more specific tax policy examples related to creating/improving existing greenspaces and parks</li> </ul>
Learning Opportunity Logistics	<ul style="list-style-type: none"> <li>• In-Person/Virtual: Indicate whether the session will be in-person or virtual.</li> <li>• Logistics Notes: Consider venue, platform, accessibility, technology needs, registration process, and continuing education credits (CE).</li> </ul>	<ul style="list-style-type: none"> <li>– The coalition will be virtual with a clear agenda.</li> <li>– Recruit technical support to assist with technology issues and engagement activities (e.g., breakout rooms for discussion)</li> </ul>

*\*\*Remember: The remainder of this document follows an excerpt of an example Learning Plan. Your Learning Plan and responses for Phase 4 and 5 may be more comprehensive.*

*Step 2d. Engage Participants through a Communications Plan*

Once the team determines how the learning opportunity will be offered and how the intended audience will register, recruitment and marketing efforts can begin. These efforts, along with plans for disseminating evaluation findings afterward, comprise the Communications Plan. Use previous work to guide the process:

- In Phase 3, the intended audience was identified.
- In the Collaboration Plan, connections with that audience were documented.

Now, discuss what messaging and communication methods will best reach and engage the audience, and document decisions. See Section 3 for resources to support recruitment and marketing to adult learners.

**Example:**

<ul style="list-style-type: none"> <li>– Send personalized invitations, calendar invites, and follow-up reminders to coalition members and their networks</li> <li>– Use virtual meeting platform that is familiar to most coalition members</li> <li>– Announce the learning opportunity during regular coalition meetings to reach members directly</li> <li>– Clearly communicate the benefits of attending - gaining valuable insights and networking opportunities</li> </ul>
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Step 3: Develop an Evaluation Plan

*Step 3a. Evaluate Individual learning opportunities*

When planning any learning opportunity, it’s essential to develop a clear evaluation plan to assess its success. The evaluation plan should consider the following:

- Process and outcome objectives
- Key evaluation questions you and your partners want to prioritize
- Evaluation methods and timelines
- How findings will be reported

**Example:**

<b>Learning Opportunity &amp; Objectives</b>	<b>Audience Reference</b>	<b>Before Workshop</b>	<b>After Workshop</b>	<b>Follow-up</b>	<b>Dissemination of Findings</b>
<i>Reference columns 3 and 5 of your Learning Plan from Phase 3 Step 2.</i>	<i>column 2 of your Learning Plan from Phase 3 Step 2.</i>				

<p><b>Opportunity:</b> Webinar</p> <p><b>Objective:</b> List the options for getting a tax passed</p>	<p>Coalition members and interest holders who share a common goal</p>	<p>Process Eval:</p> <ul style="list-style-type: none"> <li>Number of registrants</li> </ul> <p>Outcome Eval.:</p> <ul style="list-style-type: none"> <li>Poll asking participants to gauge current level of understanding of the options for getting a tax passed</li> </ul>	<p>Process Eval:</p> <ul style="list-style-type: none"> <li>Number of participants</li> <li>Debrief with presenters and LASC team to review evaluation results</li> <li>Review participation to determine if we sufficiently reached who we wanted to</li> </ul> <p>Outcome Eval.</p> <ul style="list-style-type: none"> <li>Evaluation survey to gauge whether participants can list multiple options for getting tax passed, their satisfaction with the learning opportunity, and their interest in getting involved with the effort.</li> </ul>	<p>Process Eval:</p> <ul style="list-style-type: none"> <li>Tracking of new coalition members following the webinar</li> </ul>	<p>Share through reporting to funders contributing to effort</p>
<p><b>Opportunity:</b> Presentation at coalition meeting</p> <p><b>Objective:</b> Describe the role different types of organizations can play in tax initiatives</p>	<p>Coalition members</p>	<p>N/A</p>	<p>Process</p> <ul style="list-style-type: none"> <li>Number of participants</li> <li>Debrief with presenters and LASC team to review evaluation results</li> </ul> <p>Outcome</p> <ul style="list-style-type: none"> <li>Survey given to coalition members after presentation asking them to rate their understanding of and confidence in describing to others the roles that different types of organizations can play in a policy change initiative</li> </ul>	<p>Process:</p> <ul style="list-style-type: none"> <li>Observation by coalition leadership - do areas of confusion remain? Is a follow-up session needed?</li> </ul>	<p>Share with funders</p>
<p><b>Opportunity:</b> Presentation at staff meeting</p>	<p>Parks &amp; Rec Staff</p>	<p>N/A</p>	<p>Process</p> <ul style="list-style-type: none"> <li>Number of participants</li> <li>Debrief with presenters and LASC team to review evaluation results</li> </ul>	<p>N/A</p>	<p>Share with funders</p>

<p><b>Objective:</b> Describe the role Parks &amp; Rec can play in tax initiatives</p>			<p>Outcome</p> <ul style="list-style-type: none"> <li>Survey given to staff after presentation asking them to rate their understanding of and confidence in describing the role that Parks &amp; Rec can play in a policy change initiative</li> </ul>		
<p><b>Opportunity:</b> Presentation at coalition meeting</p> <p><b>Objective:</b> Distinguish the pros and cons of different tax options</p>	Coalition members	N/A	<p>Process:</p> <ul style="list-style-type: none"> <li>Number of participants</li> <li>Debrief with presenters and LASC team to review evaluation results</li> <li>Level of engagement by coalition members during session as evidenced by questions asked and richness of discussion</li> </ul>	<p>Process:</p> <ul style="list-style-type: none"> <li>Observation by coalition leadership - is there understanding of and support for the approach selected by the steering committee?</li> </ul>	<p>Share with funders</p> <p>Might share as part of future presentations at conferences</p>
<p><b>Opportunity:</b> Series of facilitated discussions</p> <p><b>Objective:</b> Recommend the tax option that makes the most sense to pursue</p>	Coalition steering committee		<p>Process:</p> <ul style="list-style-type: none"> <li>Number of steering committee members involved</li> <li>Number of discussions</li> <li>Decision-making process used</li> </ul> <p>Outcome:</p> <ul style="list-style-type: none"> <li>Steering committee makes a decision about the tax option to pursue</li> </ul>	<p>Outcome:</p> <ul style="list-style-type: none"> <li>Coalition steering committee clearly articulates the decision to the full coalition and gains support</li> </ul>	<p>Share with full coalition</p> <p>Share with funders</p> <p>Might share as part of future presentations at conferences</p>

*\*\*Remember: The remainder of this document follows an excerpt of an example Learning Plan. Your Learning Plan and responses for Phase 4 and 5 may be more comprehensive.*

*Step 3b. Evaluate the comprehensive Learning Plan*

Unlike individual learning opportunities that focus on short-term outcomes, the comprehensive Learning Plan targets mid-term outcomes aligned with the Six Conditions of Systems Change. Therefore, it's important to evaluate the Learning Plan as a whole. Consider these components for evaluation:

**Process**

- Number and type of learning opportunities offered
- How well the learning needs were met
- Gaps that still need to be addressed

**Outcome**

- Were the desired mid-term outcomes achieved?

**Example:**

Number and type of learning opportunities offered	5 webinars, presentations, and discussion series
How well the learning needs were met	Evaluation results showed the learning objectives were met.
Gaps that still need to be addressed	As new coalition members or partners join the effort, it may be helpful for us to create a 1-pager that summarizes the key points covered in some of our introductory webinars and presentations with the coalition so that they understand the rationale for the policy direction the coalition has chosen.  We need to focus on skill building related to advocacy, power-building, etc. To support successful implementation of our selected policy plan.

Document ideas for evaluating the mid-term outcomes in the Learning Plan. (Note: Each row does not need to be filled out if the approach does not align with the team's Learning Plan. Read more about each model in the Resources in Section 3.)

<b>Evaluation Models &amp; Approaches</b>	<b>Notes - Are there questions or approaches from this resource that will be helpful as your team tracks progress toward achieving our mid-term outcomes? (Note: refer to your logic model.)</b>
Organizational Culture Change	
Workforce Assessments	
Mindset Shifts	
Policy, Systems, and Environmental (PSE) Change	Potentially - need to explore more.
Health in All Policies (HiAP)	Yes - HiAP offers tools and resources to evaluate how policy decisions are made and implemented AND whether these policy decisions have a neutral or beneficial impact on health determinants.
Health Equity Impact Assessments	
Inquiry Framework	
Other Resource:	

Other Resource:	
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*\*\*Remember: The remainder of this document follows an excerpt of an example Learning Plan. Your Learning Plan and responses for Phase 4 and 5 may be more comprehensive.*

#### Step 4: Implement and evaluate your learning opportunities & Learning Plan

Take a moment to celebrate—the team made it through a thorough, engaged planning process, and now it's time to put it into action! While implementing the plan may feel daunting, remember that the LASC team and their partners will continue to support and build on these Learning Opportunities. The relationships and root cause problem-solving they've focused on are just as valuable as the learning itself.

##### *Step 4a. Disseminate Evaluation Findings*

Consider how to share the findings and reflect on the following questions:

- Do your intended audiences for these communications go beyond your intended audiences for learning?
- What will be of interest to your various audiences?

##### **Example:**

- |   |
|---|
| <ul style="list-style-type: none"><li>- Present at leadership and coalition meetings to continue building leadership support - this should highlight successful outcomes, challenges, and next steps</li><li>- Present at a public health policy conference to highlight the strengths of the LASC process and its impact</li><li>- Some of our LASC team partners have some funding supporting this work, so reports on process and outcome evaluation results will be shared with those funders to show progress.</li></ul> |
|---|

#### Team Reflection

Before moving on to Phase 5, reflect on the implementation plan partners, resources, and logistics. Consider the evaluation questions your LASC team chose to prioritize at each evaluation stage. What do these decisions tell you about your shared values and mental models?

##### **Example:**

- |  |
|--|
| <ul style="list-style-type: none"><li>- We share a strong commitment to sustainability and community impact.</li><li>- After engaging partners from different sectors to address the challenge through policy changes, we better understand and believe in the value of collaboration and multi-disciplinary approach to systems change.</li></ul> |
|--|

## Phase 5: Reflect and Revise

Step 1: Reflect on your systems change leadership and Implementation Plan experiences

*Step 1a. Reflect on your LASC team's systems change leadership experience*

See the completed discussion guide below.

**Example:**

<b>Systems Change Leadership Discussion Guide - To what extent did the team leadership foster these systems change leadership concepts?</b>				
<b>Element of Systems Change Leadership</b>	<b>What Activities Did Your Team Do?</b>	<b>What Went Well?</b>	<b>What Was Challenging?</b>	<b>What would you change or improve?</b>
<p><b>Understand change as a process, your team's potential responses to change, and how to improve resilience.</b></p>	<p><i>How did we plan for resistance to change?</i> Our team held a brainstorming session to identify possible resistance points.</p> <p><i>Where did resistance come from?</i> The community and funding limitations</p> <p><i>How did we respond?</i> We created a response plan to address each issue.</p> <p><i>Who supported our efforts?</i></p>	<p>We identified key areas of likely resistance, allowing us to feel better prepared and more resilient in addressing resistance.</p>	<p>Some resistance came from unexpected areas, like differing priorities among partner organizations. These unexpected barriers required extra time and resources to address.</p>	<p>We would expand our outreach to understand additional perspectives and potential resistance points from other groups early in the planning phase.</p>

Section 2

<p><b>Clarify the ‘why’ behind the change and ensure there is a clear, inspirational, focused ‘future state’ that all team members understand.</b></p>	<p><i>How did we articulate the “why” behind the change?</i> We developed a “why” statement to explain the importance of safe, accessible parks for health outcomes, linking it to specific community needs.</p> <p><i>What did we do to ensure others understood the “why” or the future state?</i> This “why” statement was shared meetings with external interest holders.</p>	<p>The “why” statement helped to unify team members and provided a strong foundation for discussions.</p>	<p>Ensuring that everyone fully understood the “why” required repeated communication, which was time intensive.</p>	
<p><b>Clarify roles and responsibilities in the change process.</b></p>	<p><i>How did we establish and clarify roles?</i> We held a kickoff meeting to outline roles.</p> <p><i>Who served as the sponsor(s), change agent(s), target(s), and advocate(s)?</i></p>	<p>Roles were clearly defined, which helped prevent duplication of efforts and clarified each team member’s contributions.</p>	<p>Some team members felt uncertain about their responsibilities as the project evolved, particularly in Phase 4, and additional conversations were needed to maintain role clarity.</p>	<p>We would establish periodic role check-ins to ensure each person understands their evolving role and how it contributes to the project’s goals.</p>
<p><b>Communicate and communicate again.</b></p>	<p><i>What strategies did we use to communicate?</i> We used email updates, community meetings, and presentations to share information.</p>	<p>Consistent updates kept everyone informed, and adapting the message for each audience helped to reach them effectively.</p>	<p>It was challenging to maintain consistent messaging across all audiences and to keep everyone on the same page as the project progressed.</p>	

	<p><i>How did we communicate differently with different audiences?</i></p> <p>Messaging was adapted for different audiences.</p>			
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*Step 1b. Reflect on your Implementation Plan experience*

See the completed discussion guide below.

**Example:**

<b>LASC Implementation Plan Discussion Guide</b>				
<b>Implementation Plan Element</b>	<b>What activities did your team do?</b> <i>What was the process like for developing the ____ plan? How did your team go about developing the ____ plan?</i>	<b>What went well?</b> <i>As you consider the implementation of the ____ plan, what went well?</i>	<b>What was challenging?</b> <i>As you consider the implementation of the ____ plan, what was challenging?</i>	<b>What would you change or improve for your next LASC cycle?</b> <i>As you consider the implementation of the ____ plan, what would you change or improve?</i>
<b>Collaboration Plan</b> <i>(Consider the elements of the planning and design of the learning opportunities, the hosting, recruitment of participants, and the subject matter experts)</i>		We clearly identified who would be responsible for different pieces based on their expertise.	Encouraging attendance and participation from individuals outside of the LASC team.	Consider working with an instructional designer or an individual with training development expertise to ensure that learning objectives are met, and the trainings are more engaging.
<b>Budget and Resource Plan</b>	We drafted the budget based on discussion and prior knowledge of training costs.		We underestimated the cost of some budget line items.	

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<p><b>Project Management Plan</b> <i>(Consider the elements of planning committees, timeline, content development, and learning opportunity logistics)</i></p>	<p>Representatives from the local health department and a coalition team member coordinated all the logistics and communications and met on a regular basis to check-in on content development.</p>	<p>Having a small-sized planning committee helped us more efficiently make decisions with limited time before legislation season started.</p>	<p>It took us a little longer than initially planned to scan for existing content and identify any gaps to determine what we needed to develop from scratch.</p>	<p>Try setting up a template that would others not actively participating on the planning committee to share potential trainings and resources for the committee to review.</p>
<p><b>Communications Plan</b></p>		<p>The promotion of the learning opportunity went well in terms of frequency and using different approaches.</p>	<p>The benefits of attending the learning opportunity could have been more clearly defined during promotional efforts to boost attendance from various audiences.</p>	<p>Ensure that the benefit of the learning opportunity is clear and specific to various audiences it's being promoted to - ask for feedback from others who are not actively participating on the LASC team.</p>
<p><b>Evaluation Plan</b> <i>(was an evaluator brought in early, are areas of evaluation missing, were data gathering plans sufficient)</i></p>	<p>Two evaluators from the local and state health departments were recruited by LASC team members during the implementation phase.</p>	<p>Recruiting from within allowed us to allocate more funds to other activities.</p>		<p>Consider bringing in an outside consultant to provide additional insight on the evaluation plan.</p>

Step 2: Reflect on evaluation data and agree on the revised desired state

*Step 2a. Reflect on short-term process and outcome evaluation data*

See the completed discussion guide below.

**Example:**

<b>Learning Opportunity Evaluation Data Discussion Guide</b>			
<b>Gather evaluation data for reflection</b>	<b>What were the evaluation summary points?</b>	<b>What does the evaluation data mean for your next LASC process? What might be changed in future LASC Learning Opportunities given these results?</b>	<b>What decisions could be made now for improvement?</b>
<b>Process Metrics</b> <ul style="list-style-type: none"> <li>• # of coalition meeting</li> <li>• # of attendees</li> <li>• # of organizations present</li> <li>• # of informational materials distributed</li> </ul>	<p>We successfully hosted two virtual coalition meetings, each averaging 25-30 participants, with representation from eight different organizations. We distributed all materials as planned but feedback indicated that some participants found the information overwhelming.</p>	<p>However, we faced scheduling conflicts with some key potential advocates. To address this in the future, we will send out a survey well in advance to find the most convenient times for all participants.</p> <p>To improve future learning opportunities, we can create more concise summaries and consider using infographics to make the information more engaging and accessible.</p>	<p>Across all learning opportunities, we can simplify the content and use relevant visual aids more consistently to help audiences better understand and retain the information.</p> <p>Actively reach out to historically excluded or underrepresented organizations to ensure diverse participation.</p>
<b>Knowledge/Skill/Attitude Outcome Metrics</b> <ul style="list-style-type: none"> <li>• Assess participants' knowledge of different tax options and the roles of</li> </ul>	<p>Participants' knowledge improved significantly, as evidenced by the pre- and post-meeting surveys. However, some participants requested</p>	<p>Identify and share more relevant examples or testimonials with target audiences.</p>	<p>Explore other feedback mechanisms that can be implemented during live learning opportunities to identify additional areas for improvement and allow for</p>

<p>various organizations in tax initiatives</p> <ul style="list-style-type: none"> <li>• Measure changes in participants' attitudes towards the importance of greenspaces and their willingness to advocate for or support tax initiatives</li> </ul>	<p>more detailed examples of how they could apply this new knowledge. The pre- and post-surveys also indicated a positive shift in participant's views on the importance of greenspaces.</p>		<p>more clarification and engaging discussion.</p>
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***The remainder of this section will differ slightly from your blank worksheet as it follows an excerpt from an example Learning Plan. Your team's responses for Phase 5 may be more thorough.***

*Step 2b. Reflect on the comprehensive Learning Plan*

See the completed discussion guide below.

**Example:**

<b>Learning Plan Evaluation Data Discussion Guide</b>		
<b>What gaps still exist?</b> <i>To what extent did the individual learning opportunities within your plan build upon each other to address the Six Conditions of Systems Change?</i>	<b>What might be changed in future LASC Learning Comprehensive Learning Plans given these results?</b>	<b>What decisions could be made now for improvement?</b>
<p>While we made progress towards the mid-term outcomes and achieved a few, there were missed opportunities to connect more short- and mid-term outcomes to each other. Tailoring specific learning opportunities to target audiences is important, but sharing the overall vision and creating spaces for collaboration is also valuable.</p>	<p>Find a way to clearly illustrate the overarching vision for the community during learning opportunities.</p>	<p>Reflect on the steps we take and decisions we make as a team to ensure that they are aligned with the overarching vision.</p>

*Step 2c. Reflect on mid-term outcomes*

See the completed discussion guide below. (The table below shows responses specifically for the policy condition of systems change.)

**Example:**

<b>Mid-Term Outcome Evaluation Data Discussion Guide</b>				
<b>Condition of Systems Change</b>	<b>Possible LASC Process Evaluation Questions</b>	<b>What went well/what changed for this condition of systems change? (Celebrate small wins!)</b>	<b>Why do you think this change occurred/didn't occur?</b>	<b>What improvement would you make to the learning opportunity or LASC process to increase the impact of your work?</b>
Policies	Where did policy change occur/not occur? What served as facilitators or barriers to policy change? How did organizational policies facilitate or impede the LASC process?	There is now an increased awareness of how tax might be passed to generate funding for the creation, renovation, and maintenance of green spaces.	Unfortunately, the tax did not receive enough support to pass, and this was likely due to the learning opportunities not reaching all the necessary audiences to generate support and/or not increasing participants' confidence and ability to use persuasive communication.	Increase the number of learning opportunities and tailor each to reach a specific audience.

*Step 2d. Decide if, how, and why the desired state might change*

Summarize 3-4 key findings from the LASC Learning Plan evaluation, including evidence of progress towards the desired state and readiness to revise it or select a new sub-factor. Reflect on potential changes to the desired state or new sub-factors based on evaluation data.

**Example:**

Many participants were initially unfamiliar with policy initiatives and the role of different organizations in their community. The coalition meetings and discussions significantly enhanced their understanding of the importance of greenspaces in addressing high rates of Type 2 diabetes and their knowledge of one way more funding can be generated to improve greenspaces. To improve applicability and action from different organizations, additional meetings are needed.

Our team fostered several new connections and relationships with various organizations, policy makers, and other individuals within the community. With this expanded network, more discussions are being held about how to address the pressing community challenge. In fact, we invited a new partner to the core LASC team to actively participate in future iterations of the LASC.

Based on several conversations and different polling, we've found that while there is increased momentum to increase funding for recreational parks and greenspaces in the community, our time-bound desired state needs to be revised. There could be multiple creative funding solutions. We would like to broaden our time-bound desired state to focus on "increased funding" in general - not just increased funding from the county. By broadening our focus, we think we can be more successful in leveraging increased funding from the country with increased financial contributions from businesses. We see good opportunity to focus on public-private partnership funding as a way to achieve sustainable expansion of greenspace availability.

Step 3: Assess LASC team readiness as an effectively functioning team focused on systems change  
*Step 3a. Assess your LASC team for Five Key Actions of High Performing Teams Focused on Systems Change*  
 See the completed team functioning discussion guide below.

**Example:**

Elements of Team Functioning	Where did you start as a team in these team effectiveness concepts?	What happened during the LASC cycle to apply or learn about this team effectiveness concept?	What did you learn about this concept?	What more do you need to learn for your next LASC cycle?
Team Development: Build and strengthen an effective team	Our team had a decent understanding of the importance of having a diverse team and invited individuals from several different organizations to be involved.	Hearing different perspectives on a complex issue provided a better understanding of the root causes, but there was tension in some meetings.	It's not enough to simply have a diverse team. We learned that it's important to intentionally create opportunities to build trust and foster collaboration in a healthy, sustainable way.	We need to hold more space for team members to learn more about each other and where they're coming from to enhance our team's cohesiveness and effectiveness.
Team Facilitation: Establish team facilitation and group norms	We had clear facilitation approaches and group norms in place based off our previous experiences.	We established a clear plan that worked well for most meetings, particularly for our LASC team, because we would leave feeling as though we had been productive and were clear about the next steps. However, this plan was not always sufficient for more collaborative meetings.	We learned that our facilitation approaches and group norms sometimes contributed to individual voices' being left out of or ignored during important conversations.	We need to continue to strengthen our facilitation techniques and be willing to try new methods to ensure that all voices are heard.

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Process management: Develop plans to implement and evaluate process	Our team had experience with process management and a good understanding of what resources were available before starting this effort.	We leveraged our existing knowledge and resources to create detailed implementation and evaluation plans.	We learned that utilizing available resources effectively can streamline the LASC and enhance outcomes.	We need to focus on integrating more robust evaluation methods to better assess the effectiveness of our processes.
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*Step 3b. Assess current team readiness against each of the LASC principles*

See the completed Foundational LASC Principles discussion guide below.

**Example:**

<b>Four Foundational LASC Principles</b>	<b>Where did you start as a team in readiness for these principles?</b>	<b>What happened during the LASC cycle to apply or learn about this principle?</b>	<b>What did you learn about this principle?</b>	<b>What more do you need to learn for your next LASC cycle?</b>
<b>Equity</b>	3 - Our team was confident in our understanding of DEI but had a mixed understanding of some associated terminology.	Early in the process, our team researched and selected a few videos for each team member to watch on their own to ensure we had a better shared understanding of equity.	We learned that equity requires continuous learning and self-reflection to address biases and systemic barriers effectively.	We need to deepen our understanding of how to implement equity-focused strategies in our daily work and measure their impact.
<b>Systems Thinking</b>	3 - Our team lacked practical experience of applying systems thinking approaches across all team members.	Working through the LASC steps and exploring some of the provided resources improved our team's baseline knowledge of systems thinking and confidence	We learned how systems thinking can help us see the bigger picture and understand the interconnectedness of various factors affecting T2D.	We need to practice applying systems thinking tools more regularly to strengthen our ability to identify and address complex issues.

		in applying some of the tools.		
<b>Engagement</b>	2 - While our core team was familiar with each other and other organizations working in the chronic disease space, we lacked connections with individuals living with T2D and their local service providers.	We reached out to local T2D support groups and service providers to build relationships and understand their needs and challenges as we were developing our comprehensive learning plan.	We learned that meaningful engagement requires building trust and maintaining ongoing communication.	We need to establish more consistent and structured engagement practices to ensure continuous collaboration with local partners and individuals living with T2D.
<b>Leadership</b>	3 - Our team knew we needed to authentically seek out diverse perspectives regarding T2D to collaboratively identify and address its root causes.	We hosted a larger discussion with multiple interest holders to gain a better understanding of T2D and its root causes to gather a wider range of insights and perspectives.	We learned the importance of inclusive leadership and the value of diverse viewpoints in establishing a strong foundation as a team to influence systems change.	We need to develop stronger facilitation skills to ensure all voices are heard and valued in our decision-making processes.

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*Congratulations! The LASC team's first LASC cycle has been completed! It's time for them to celebrate their hard work and learning with their LASC team and partners.*

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# Applying the Learning Agenda for Systems Change

## LASC Worksheet

### Phase 1: Foundational Readiness Planning

Step 1: Consider Elements of Team Functioning

*Step 1a. Build and strengthen an effective team*

[Refer to page 23 in Section 2.]

As you begin your LASC work, consider who else has an interest in this issue. Start by conducting an environmental scan to identify organizations, groups, or individuals who may have an interest in the issue and those who may be able to influence the well-being of the community.

**Consider the following questions when identifying interest holders:**

- What groups or individuals are affected by the issue?
- Who cares about the issue?
- What groups are working on the issue?
- What groups are invested in a solution?
- What groups or individuals are in a position or have power to make changes in the conditions that affect the issue?
- Who controls resources related to the issue?
- Who has relationships with those who are affected by the issue?
- Which organizations set policies that impact this issue?

**Interest holders may include:**

- Advocacy groups
- Businesses
- Coalitions
- Economic development organizations
- Educational entities (early childhood, school-age, or post-secondary)
- Environmental groups
- Elected officials
- Food security organizations
- Governing bodies
- Grassroots organizations
- Health care agencies or networks
- Housing organizations
- Mental health organizations
- Municipal agencies
- Nonprofits
- Parent groups
- Policymakers
- Recreation groups
- Religious organizations



Highlight or circle the individuals or groups who are currently part of your team or whom you would like to invite to join the LASC team.

A high-functioning LASC team will have a diversity of strengths, expertise, perspectives, and experiences.

*Step 1b. Establish team facilitation and group norms*

[Refer to page 23 in Section 2.]

Develop a team charter to outline the decision-making process, roles, and responsibilities and establish guidelines for addressing leadership changes. **Use the table below to document details on key aspects of team facilitation and group norms:**

Team Charter	Notes
<p><b>Coordination Lead</b> Who will serve as the coordination lead for the Learning Agenda for Systems Change team? Is there one organization or individual who will take the lead for setting up meetings, tracking decisions, or handling other logistics?</p>	
<p><b>Work Implementation</b> Who is responsible for implementing the work? Which individuals or organizations do you anticipate being involved with the different components of implementing the Learning Agenda?</p>	
<p><b>Decision-Making Process</b> How will the team make decisions? What process will be used (e.g., consensus, majority vote)?</p>	
<p><b>Timeline</b> What is the timeline for completing the work? Are there any external deadlines or timelines you want to be aware of?</p>	
<p><b>Communication &amp; Coordination</b> How will the multiple partners implementing the work stay connected and in communication with each other?</p>	
<p><b>Leadership Turnover</b> What will the team do in the event of leadership changes?</p>	

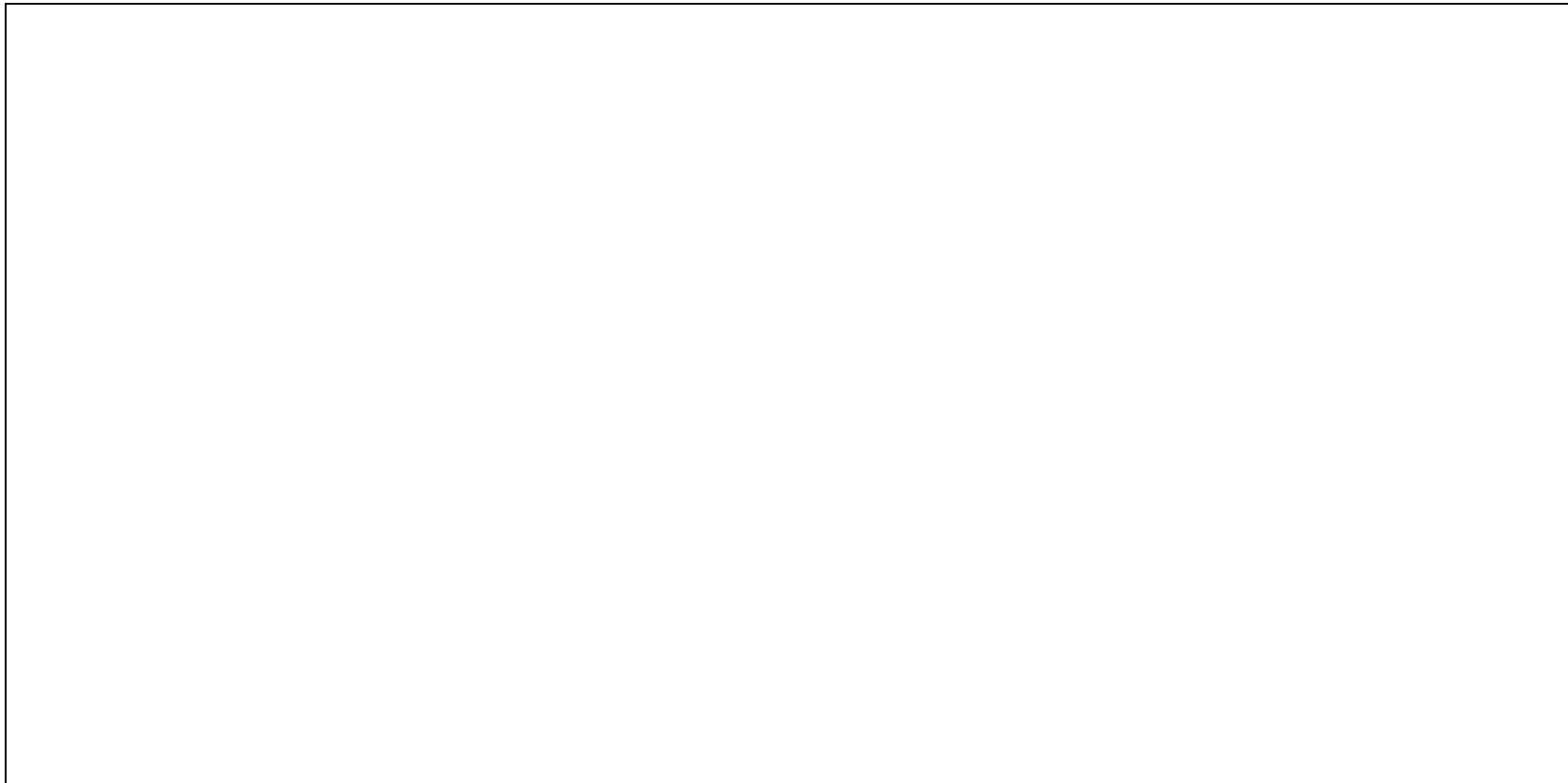
*Step 1c. Develop plans to implement and evaluate process*

[Refer to page 24 in Section 2.]

Ensure your team has a clear understanding of available resources to support your LASC work, including human, financial, and leadership support.

***Discuss and document the following in the spaces provided below:***

- What leaders and key sponsors can endorse the team's undertaking of LASC?
- What human, physical, fiscal and other resources might be offered by leaders and key sponsors?
- What team members and platforms are available for project management, work plan development, and process evaluation?



- Do your teams regularly build in process evaluation as well as outcome evaluation in their work?
- Can you envision making time for reflection and identifying and acknowledging where conflicts need to be resolved?
- How is quality improvement currently done in your organization and those of your partners? How can your team document and suggest process changes that will be widely adopted?



*Step 1d. Assess elements of team functioning*

[Refer to page 25 in Section 2.]

Now, it's time to assess your team. Use the rubric below to evaluate your team across key elements of team performance.

Early		Established		Strong	
1	2	3	4	5	6
Not yet or learning stage	Planned but not started or in initial/pilot stages of implementation	Working towards this but not fully achieved	Fully achieved	In place with evidence of its use (e.g., policies, procedures, robust evaluation plan)	Practices are sustainable and ongoing and may be shared with others as "best practices"

**Enter your team's score for each element of team performance and calculate the total score.**

Elements of Team Performance	Your Team's Score (1-6)
<b>1.</b> Our team has the diversity of strengths, expertise, perspectives, and experiences needed to do this collective work.	
<b>2.</b> Our team has team facilitation approaches and group norms in place.	
<b>3a.</b> Our team has leadership and key sponsor support.	
<b>3b.</b> Our team has experience creating implementation plans that include resource allocation.	
<b>3c.</b> Our team is prepared to create an evaluation plan for the LASC process.	
<b>Total</b>	

**Important:** You will need this number to calculate your team's overall readiness score in Step 3, so make sure to keep it.

Step 2: Consider four Foundational LASC Principles

*Step 2a. Equity*

[Refer to page 26 in Section 2.]

To do LASC work, ensure all team members understand the following:

- Definitions of and differences between diversity, equity, inclusion, and liberation.
- Why it's important to address the structural and social determinants of health
- How initiatives like LASC can help create positive change
- History of oppression, injustice, and other inequities

Identify and discuss the benefits, concerns, potential opportunities, and risks of focusing on equity in your organization and community. Develop a common understanding and shared vocabulary around lived experiences regarding equity and inequities, justice and injustices.

***Use the space below to record the major points from your team's discussion(s).***

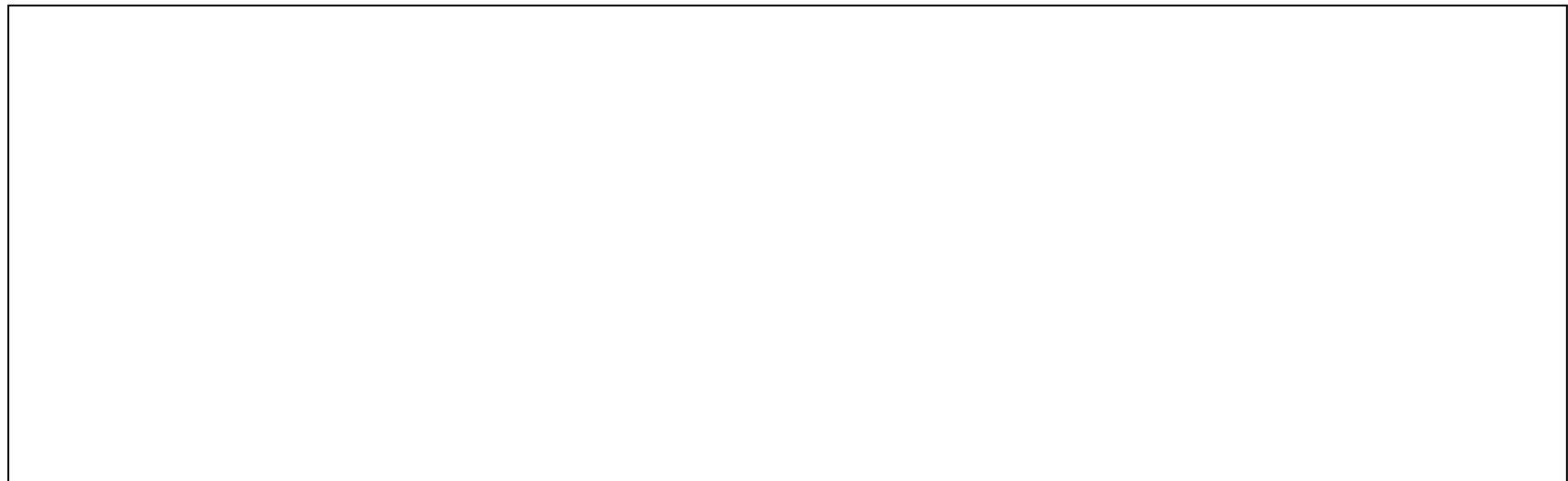
*Step 2b. Systems thinking*

[Refer to page 26 in Section 2.]

Reflect on your team's understanding and experience with systems thinking in the areas of

- Systems thinking tools and processes and their role in systems change
- Experience implementing systems thinking initiatives like Policy, Systems, and Environmental change
- Documented evidence of systems thinking efforts in the organization or community to date

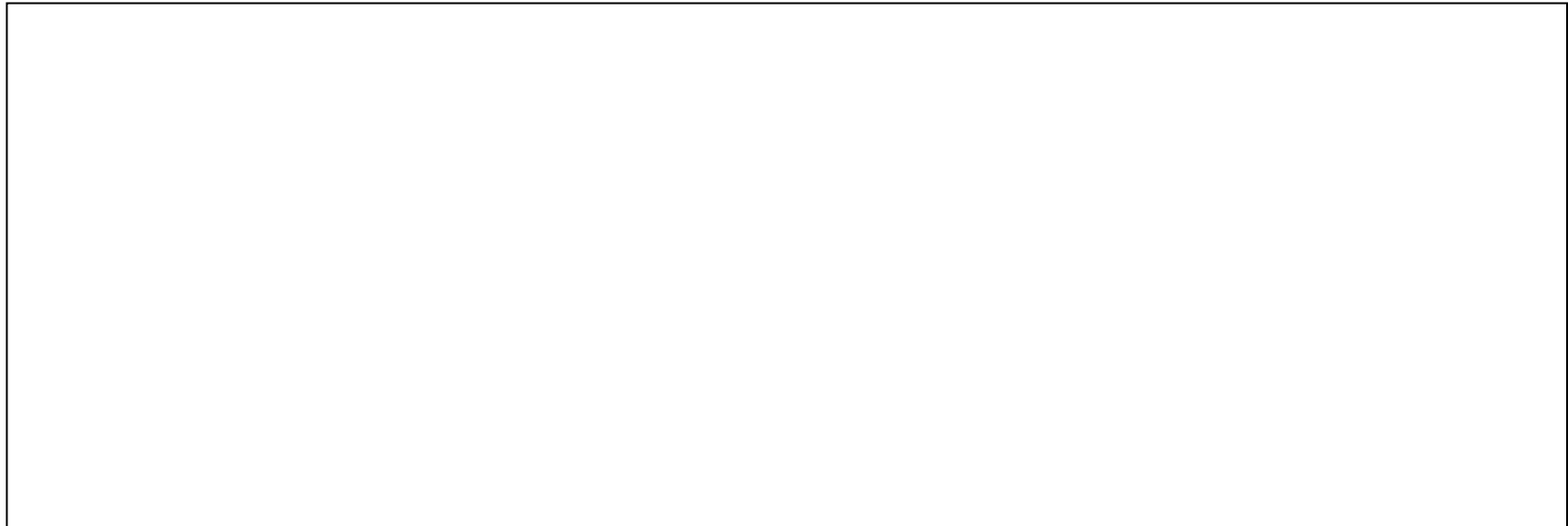
Discuss gaps, strengths, and opportunities for improvement. ***Use the space below to capture the major points from this discussion.***



*Step 2c. Engagement and relationship building*

[Refer to page 27 in Section 2.]

Reflect on your team's quality, history, and depth of existing engagement with team members, across the organization, and/or community to gauge areas that might need improvement. Look at your team's community engagement processes to ensure that they prioritize those with lived experience and shared power. Discuss gaps, strengths, and opportunities for improvement. ***Use the space below to capture the major points from this discussion.***

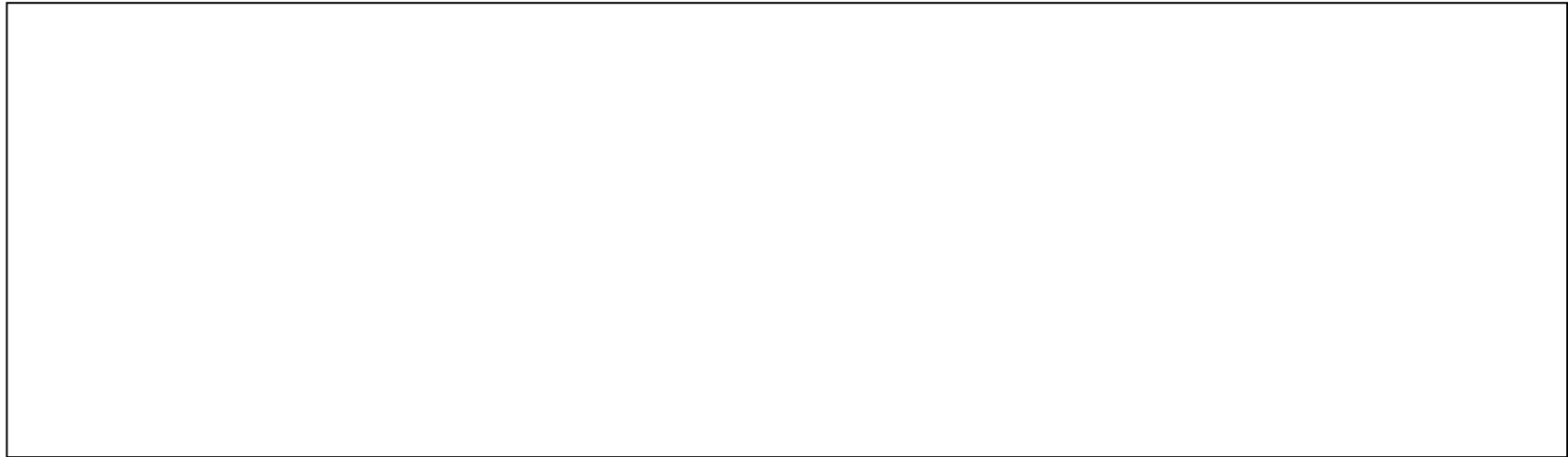
A large, empty rectangular box with a thin black border, intended for capturing the major points from the discussion. It occupies the lower half of the page.

*Step 2d. Leadership*

[Refer to page 27 in Section 2.]

With your team, create a statement of the intent and purpose of the LASC process and ensure that your team clearly understands the differences between transactional and transformational change.

***Use the space below to capture your team's statement and other major points from your discussion.***

A large, empty rectangular box with a thin black border, intended for capturing the team's statement and other major points from their discussion.

*Step 2e. Assess team’s readiness related to the four Foundational LASC Principles*

[Refer to page 27 in Section 2.]

Now, it’s time to assess your team again. Use the rubric below to evaluate your team’s readiness related to the four foundational LASC principles.

Early		Established		Strong	
1	2	3	4	5	6
No work yet or learning stage	Planning not started or in initial/pilot stages of implementation	Working towards this but not fully achieved	Fully achieved	In place with evidence of its use (e.g., policies, procedures, robust evaluation plan)	Practices are sustainable and ongoing and may be shared with others as “best practices”

**Enter your team’s score for each of the four principles and calculate the total score.**

Four Foundational LASC Principles	Your Team’s Score
1. Our team can define and explain the importance of equity and ensure that it has a common understanding and shared vocabulary regarding equity, inequities, justices, and injustices.	
2. Our team understands systems thinking and has tools and processes in place to implement systems thinking initiatives.	
3. Our team has engaged and built authentic relationships with organizations, partners, and the community needed to do this work.	
4. Our team has effective leadership in place to work with the group to create a statement of purpose for the LASC.	
<b>Total</b>	

**Important:** You will need this number to calculate your team’s overall readiness score in Step 3, so make sure to keep it

Step 3: Reflect on your readiness score and next steps

*Step 3a. Add up your LASC Readiness Assessment score*

[Refer to page 28 in Section 2.]

Now it's time to add up your total scores from Step 1d and 2e to **calculate your team's overall readiness assessment score**. This number should range from 9 to 54.

Overall LASC Readiness Assessment score:

Score	Readiness for Systems Change and Health Equity
9-18	Early Readiness
19-36	Established Readiness
37-54	Strong Readiness

Refer to the 'Example Team Readiness Levels and Next Steps' table on pages 30 of Section 2 for tailored questions prompts that align with your team's readiness level to complete the table below. Discuss the implications of your team's overall readiness score and identify clear next steps for improvement.

***Use the space provided to document the actions you plan to take based on your score and discussions.***

Trainings and Resources	Work to Increase Your Team's Readiness	Decision About Moving Phases 2-5

## Phase 2: Define Challenge & Create the Vision

Step 1: Identify community or organizational challenges

*Step 1a. Gather existing health and equity assessment data*

[Refer to page 36 in Section 2.]

Start by gathering the following types of data about the community:

- Demographic data
- Health disparities data
- Economic indicators
- Information about existing programs or initiatives

It's important to gather and review data from multiple sources to cross-verify and gain a more comprehensive understanding of the community's strengths, challenges, opportunities, and threats. Some key places to start your search are listed below:

- Community Health Assessments (CHAs) or Community Health Needs Assessments (CHNAs) from local health departments or healthcare systems
- Needs assessments or issue reports from community-based organizations
- Your state health department or Public Health Institute for state-specific health inventories
- National data sources such as:
  - County Health Rankings and Roadmaps
  - National Environmental Public Health Tracking Network
  - Social Vulnerability Index
  - Community Commons

Refer to Section 3 of your guide for a full listing of data resources.

<b>Questions you want to answer about your topic area</b> - information about the community to get a sense of its strengths, challenges, opportunities, and threats	<b>Sources of information</b>	<b>Notes/Findings</b>
What are the priority health or safety concerns?		
Who is impacted?		
How are they impacted?		
What is the impact on the community or system as a whole?		
Who is actively working on the problem? What initiatives are currently implemented?		
What asset-based view of the community isn't included in this data?		

*Step 1b. Structure a comprehensive approach to identify the challenge*

[Refer to page 37 in Section 2.]

Identify and coordinate separate conversations with two individuals that are not in public health or healthcare and are closely connected with the community to talk to get their perspective on the challenge(s) facing the community.

**Use the question guide below and take notes in the space provided.**

<b>Conversation 1: [List name here]</b>	
<b>Questions</b>	<b>Notes</b>
What would you say are the primary challenges facing the community? Does the community agree that is the primary challenge?	
Who is most impacted by the problem?	
How are they impacted?	
Why is this challenge occurring? What causes it? What keeps the problem in place?	
What policies, practices, rules, or regulations keep the challenge in place, or make the challenge worse?	
Who is causing the problem or who plays a role in keeping the challenge in place?	
What policies, practices, rules, or regulations are positively impacting the challenge?	
Who is currently involved in trying to address the problem?	
What assets exist in the community that should be considered when addressing the challenge?	
What outcome would the community find of value if the challenge were addressed?	
How would you define success? What would things look like if the challenge was addressed? What would be different?	

**Conversation 2: [List name here]**

Questions	Notes
What would you say are the primary challenges facing the community?	
Who is most impacted by the problem?	
How are they impacted?	
Why is this challenge occurring? What causes it? What keeps the problem in place?	
What policies, practices, rules, or regulations keep the challenge in place, or make the challenge worse?	
Who is causing the problem or who plays a role in keeping the challenge in place?	
What policies, practices, rules, or regulations are positively impacting the challenge?	
Who is currently involved in trying to address the problem?	
What assets exist in the community that should be considered when addressing the challenge?	
How would you define success? What would things look like if the challenge was addressed? What would be different?	

With this new insight from others within the community, *critique the existing data you have gathered and fill in any additional gaps in your team's understanding.*

Based on the additional insight you gathered from community sources...	Sources of information	Notes/Findings
What additional data do you need on any of the social determinants of health? ( <a href="#">Resource</a> )		
What additional data you need about specific populations within your community (e.g., disabled veterans, migrant farmworkers, transgender young adults, etc.)?		
What biases (intentional or unintentional) might be present in your existing data and how it is presented?		
<p>What additional data or historical context might you need on historic or current structural systems and policies (e.g., redlining, investments in education, transportation, etc.) that impact the challenge?</p> <p>Have systems or policies changed, and if yes, how have they changed?</p> <p>What information do you need to understand the role these systems and policies play in creating or sustaining injustices that have led to the community challenge?</p>		
What patterns, if any, do you see among the contributors to this problem?		
What contributors to the problem are connected and how are they connected?		

*Step 1c. Select an adaptive/complex challenge on which to focus*

[Refer to page 39 in Section 2.]

Based on the research your team has done, what issue will you focus on addressing?

***Write the issue in the space provided below.***

*Step 1d. Create a challenge and vision statement for your Learning Agenda for Systems Change*

[Refer to page 41 in Section 2.]

Now, based on the challenge your team identified above, ***refine it into a more specific challenge statement using the following prompts:***

The problem of [health outcome or issue] in [specify community or population] results in [impact].

***Write your refined, more specific challenge in the space provided below.***

Then, flip your challenge to create the vision – the future state you want to see.

***Write your vision in the space provided below.***

Step 2: Gain a deeper understanding of the selected challenge

*Step 2a. Identify contributing factors and root causes using systems thinking approaches and tools*

[Refer to page 43 in Section 2.]

What are the factors that contribute to or perpetuate the community or systems challenge you identified in Step 1? Ask yourself “Why is the situation in occurring?” “What are the factors that perpetuate this challenge?” Consider using the “5 Why’s” approach to peel back the layers of the problem.

***With your team, discuss and list these factors using the space below:***

Factors

Step 2b. Build consensus to select a more adaptive contributing factor on which to focus

[Refer to page 44 in Section 2.]

Label your factor list “T” for technical or “A” for adaptive.

Factors	T or A?

Now, looking at your “A” (adaptive factors), ***pick one to focus on based on:***

- The importance of the factor
- The partners engaged and working on this factor
- The alignment to LASC team members’ organizations’ missions
- The level of investment needed and assets available from multiple partners
- The opportunity for impact

**Selected Adaptive Factor:**

--

Step 2c. Dive deeper into the selected contributing factor using systems thinking approaches.

[Refer to page 44 in Section 2.]

Consider your selected factor and ask yourselves, “why is this happening? Why is this contributing sub-factor continuing to exist?”

**With your team, discuss and list these sub-factors using the space below:**

Sub-factors

**Label your sub-factor list “T” for technical or “A” for adaptive.**

Sub-factors	T or A?

Now, looking at your “A” sub-factors, **pick one to focus on based on:**

1. The importance of the factor
2. The partners engaged and working on this factor
3. The alignment to LASC team members’ organizations’ missions
4. The level of investment needed and assets available from multiple partners
5. The opportunity for impact

**Selected Adaptive Sub-factor:**

--

Now that you know the desired state you are working towards, are there any additional organizations or groups you should add to your Interested Holders List (see Phase 1)?

***Add groups to the chart below, indicating how they might be connected to the issue.***

Name of Organization	Describe their Interest in the Issue or Desired State

Step 3. Write the challenge and time-bound desired state statements  
[Refer to page 46 in Section 2.]

Write a more specific challenge statement that includes the adaptive sub-factor (or root cause) your team has chosen. ***Use the following template to guide your statement:***

“The problem \_\_\_\_\_ [issue] exists because \_\_\_\_\_ [root cause] resulting in \_\_\_\_\_ [impact].

Now that you have a clear sub-factor challenge statement, your team will create a time-bound desired state. If the root cause (sub-factor) you are focusing on for the first iteration of your Learning Agenda was addressed, what would it look like?

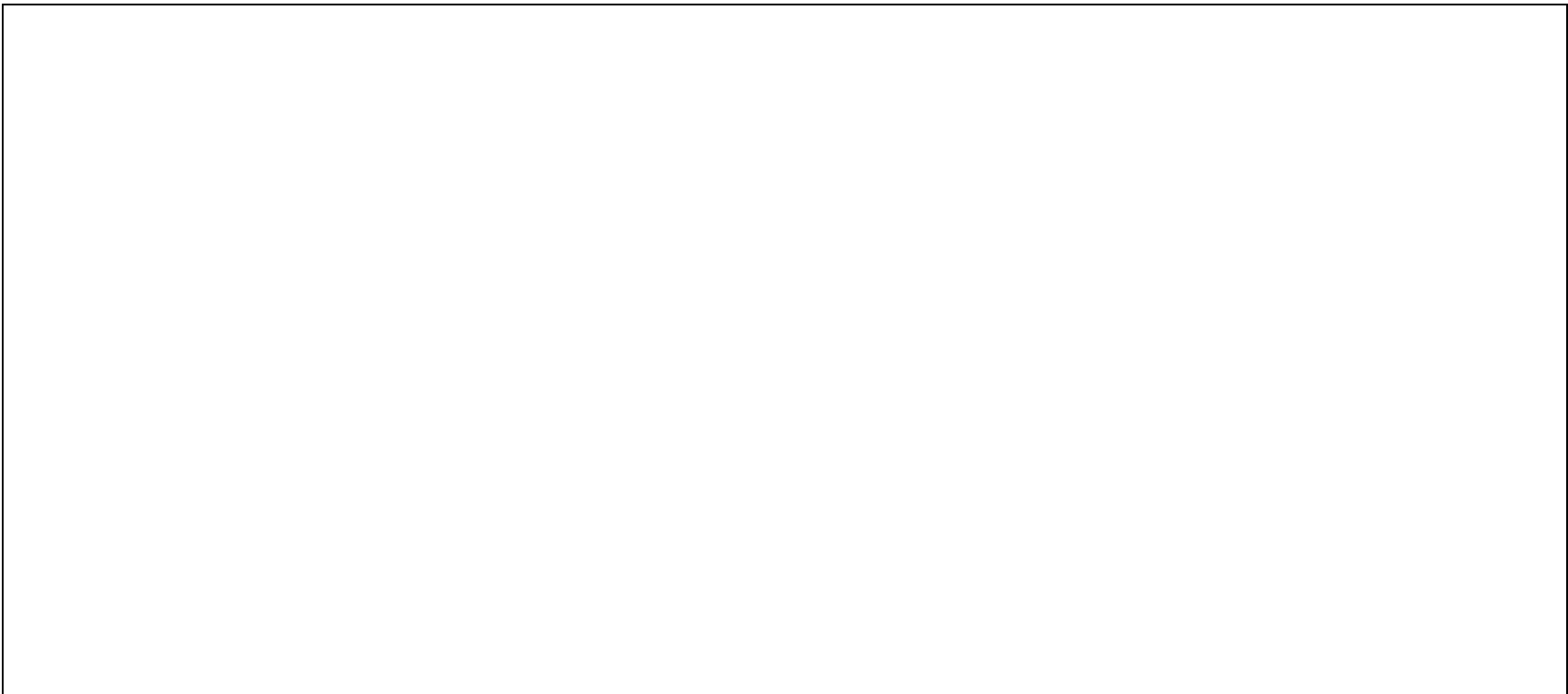
***Write your time-bound desired state below:***

*Team Reflection*

[Refer to page 47 in Section 2.]

Before moving onto Phase 3, take a moment to ***reflect on how your assumptions, as well as your team's, have been challenged throughout this process.***

- What thoughts do you have about the challenge now?
- What new questions do you have about what is happening to cause this challenge?
- What assumptions did you and the team have going into this phase that may have changed along the way as you learned more about the community?
- Are there additional members that should be invited to the team to add support, expertise or insight to your work?



### Phase 3: Creating a Logic Model and Learning Plan

Step 1. Create a Logic Model of learning required for change

*Step 1a. Outline your logic model*

[Refer to page 52 in Section 2.]

**Create a Logic Model template with your time-bound desired state from Phase 2 Step 3 as your long-term outcome.**

(Note: you will be working from right to left in the table).

Short-Term Outcome Changes to knowledge, skills, attitudes	Mid-Term Outcome Changes to conditions	Long-Term Outcome Changes to systems

*Step 1b. Identify the conditions needed for systems change – the mid-term outcomes*

[Refer to pages 53 in Section 2.]

**Use the guiding questions below to outline the mid-term outcomes in your Logic Model:**

1. What **policies** need to change in order to achieve the long-term outcome?
  - a. What laws, policies, rules, or regulations currently stand in the way of our long-term outcome (and need to be removed or modified)?
  - b. What laws, policies, rules, or regulations could be initiated to support our long-term outcome?
2. What **practices** need to change to achieve the long-term outcome?
  - a. For this category you might consider enforcement practices, or practices that guide how we do our work.
  - b. What communication strategies currently exist or would need to be established?
3. What could change regarding **resource flows** that would help achieve the long-term outcome?
  - a. What resources (financial and human) currently exist to support greenspaces in the city?
  - b. How are resources currently allocated? Where are there resource gaps?
4. What changes to **relationships or connections** would help achieve your long-term outcome?
  - a. What partnerships exist or need to be created or strengthened?
  - b. Where might relationships need to be repaired?

- 5. What changes to **power dynamics** would help achieve your long-term outcome?
  - a. Who currently holds power in the system?
  - b. Who has the power to make change?
- 6. What change to **mental models** is needed to bring about your long-term outcome?
  - a. What are the existing mental models that prevent change from occurring?
  - b. What beliefs or values led to our current ways of doing things?

Short-Term Outcome Changes to knowledge, skills, attitudes	Mid-Term Outcome Changes to conditions	Long-Term Outcome Changes to systems
	<b>Policy:</b>	
	<b>Practice:</b>	
	<b>Resource Flows:</b>	
	<b>Relationships/Connections:</b>	
	<b>Power Dynamics:</b>	
	<b>Mental Models:</b>	

Step 1c. Identify the changes in knowledge, skill, and attitudes needed (short-term outcomes)

[Refer to page 56 in Section 2.]

To complete the short-term outcome column, your team should **identify what knowledge, skills, and attitudes people will need to achieve the mid-term outcomes listed above**. Specifically, consider the following:

- Knowledge: What will people need to know to bring about each mid-term change listed above?
- Skill: What will people need to know how to do to bring about each mid-term change listed above?
- Attitudes: What attitudes or individual mental models will need to be addressed to bring about each mid-term change listed above?

Short-Term Outcome Changes to knowledge, skills, attitudes	Mid-Term Outcome Changes to conditions	Long-Term Outcome Changes to systems
Have Knowledge About:	Policy:	
Have Skill To:		
Attitude:		
Have Knowledge About:	Practice:	
Have Skill To:		
Attitude:		
Have Knowledge About:	Resource Flows:	
Have Skill To:		
Attitude:		
Have Knowledge About:	Relationships/Connections:	
Skill		
Attitude:		
Have Knowledge About:	Power Dynamics:	
Have Skill To:		
Attitude:		
Have Knowledge About:	Mental Models:	
Have Skill To:		
Attitude:		

Step 2: Create a Learning Plan

*Steps 2a-2e. For each change...*

- 2a. Identify competencies
- 2b. Prioritize audiences
- 2c. Draft learning objectives
- 2d. Identify learning conditions: length, dose, interaction with content
- 2e. Suggest learning modality

[Refer to pages 59-65 in Section 2.]

Now it's time to create a multi-layered Learning Plan using the template below. Your team will work through the plan one column at a time, moving from left to right, following the instructions outlined in Section 2. ***Use the guiding questions below to discuss with your team and complete your Learning Plan for the short-term outcomes in your Logic Model.***

**Competencies:** What do people need to be capable of to achieve the short-term objective?

Audience: Who needs to be competent in these areas?

**Learning Objectives:** What should happen as a result of the learning?

- What should the audience know after participating in the learning?
- What should the audience be able to do after participating in the learning?
- How should the audience's attitude or beliefs change after participating in the learning?

**Learning Conditions:** Based on the learning goals we just identified, we now consider the content.

- How much content needs to be delivered?
- How much of the content is new content?
- How complex or nuanced is the content?
- What do learners need to be able to do with the content - remember it, apply it, use it to develop something new?

**Learning Modality:** What type of training (e.g., webinar, meeting, presentation, simulation, video) will be appropriate for each audience, given the learning objectives and the conditions needed to achieve those objectives?

<b>2a: Competencies</b> <i>needed to achieve short-term outcome</i>	<b>2b: Audience(s)</b> <i>that need these competencies</i>	<b>2c: Learning Objectives</b> <i>- outcomes of the learning opportunities that would help the audience gain competency</i>	<b>2d: Learning Conditions</b> <i>that are needed to achieve the learning objectives</i>	<b>2e: Learning Modality</b> <i>that will provide the learning conditions to achieve the learning objectives and</i>	<b>Short Term Outcome:</b>
			Length: Dose: Interaction:		
			Length: Dose: Interaction:		
			Length: Dose: Interaction:		
			Length: Dose: Interaction:		
			Length: Dose: Interaction:		

Step 3: Build and maintain relationships with potential collaborators

[Refer to page 65]

Review your Interest Holders List to determine which individuals, groups, or organizations might support the development or hosting, provide the content expertise, or are connected to the intended audience for the learning opportunities in your Learning Plan. Reflect on the existing relationship the team has with each group and identify next steps you might take.

***Use the template below or an alternative chosen by your team to plan outreach efforts with potential collaborators:***

Individual, Group, or Organization	Existing Relationship with LASC Team	Next step

Team Reflection

[Refer to page 66 in Section 2.]

Before moving onto Phase 4, reflect on the Logic Model and the proposed learning opportunities at a high level.

- Would you have reached that set of learning opportunities in your Learning Plan if you had not gone through the in-depth process of defining the challenge?
- Would your audiences have had the same breadth if you had not gone through the development of your Logic Model?
- Do you feel confident that the proposed learning will begin to lead to some changes over time?
- Do you feel that you can share your Logic Model with others?
- Can your Logic Model serve as a tool to connect other work that you and other team members are working on (i.e., specific project workplans or agency workforce development plans)?

***Use the space below to document some of your team’s reflections using the guiding questions in Section 2:***

## Phase 4: Implement and Evaluate

Step 1: Leverage change leadership skills toward the time-bound desired state

[Refer to page 68 in Section 2.]

Discuss and reflect on the key systems change leadership concepts of:

1. Understand change as a process, your team's potential responses to change, and how to improve resilience.
2. Clarify the why behind the change and ensure there is a clear, inspirational, focused future state that all team members understand.
3. Clarify roles and responsibilities in the change process. Examples of these roles include:
  - Sponsor: Individual or group who has the organizational power to legitimize the change
  - Change Agent: Individual or group responsible for implementing the change
  - Target: Individual or group being impacted by the change
  - Advocate: Individual or group who wants the change to occur and does not have the organizational power to legitimize it
4. Communicate and communicate again.

***Note your reflections using the space provided below.***

Step 2: Develop an Implementation Plan

*Step 2a. Identify learning opportunity partners in a Collaboration Plan*

[Refer to page 70 in Section 2.]

Using the chart you created in Phase 3 Step 3, create a Collaboration Plan to outline which specific learning opportunities from the Learning Plan each potential collaborator can host or lead, along with the roles of others involved. Some key roles to consider for each learning opportunity include:

- **Planning/Design:** Individuals involved in the planning will refine learning objectives, identify and secure presenters/instructors, and make decisions about logistics. *(Read more about the learning opportunity planning committee in Step 3 below).*
- **Host:** This organization will provide the physical location or the online meeting link for the learning opportunity. They will likely also manage registration and evaluation surveys.
- **Recruitment:** These organizations are closely connected to the intended audience for the learning opportunity and will help promote participation in the learning opportunity.
- **Subject Matter Expert:** Individual(s) from this organization have the content or context expertise necessary to achieve the learning objectives.

Learning Opportunity/Objectives	Role	Organization
<b>Opportunity:</b>	Host learning opportunity	
	Lead planning/design	
	<b>Objective:</b>	
	Lead recruitment	
<b>Objective:</b>	Provide subject matter expertise	
	Host learning opportunity	
	Lead planning/design	
	<b>Objective:</b>	
Lead recruitment		
<b>Opportunity:</b>	Provide subject matter expertise	
	Host learning opportunity	
	Lead planning/design	
	<b>Objective:</b>	
Lead recruitment		
<b>Objective:</b>	Provide subject matter expertise	

*Step 2b. Determine budget in a Resource Plan*

[Refer to page 72 in Section 2.]

Next, take time to reflect on your budget. This may cover your entire Learning Plan or individual learning opportunities.

**Use the space below to note key costs and other budget line-item details.** Some examples may include but are not limited to:

- Subject matter expert, presenter, facilitator, and/or instructional design fees
- Continuing education (CE) credit consultants and provider fees
- Technology (video conferencing platform, learning management system (LMS) or other registration platform, survey platform for evaluation, software to support participant engagement or e-learning design)
- Marketing (e.g., email newsletter service)
- Graphic design, stock photos, possible copyright permissions for imagery
- Captioning, transcription, and/or language interpretation services
- Staff time for coordination
- Funds to support partner engagement
- For in-person events: space, A/V equipment, travel, printing, and food

Item	Estimated Cost

*Step 2c. Develop specific learning opportunities in a Project Management Plan*

[Refer to page 72.]

Then, develop a Project Management Plan for each individual learning opportunity. Each plan should detail all the following:

- Planning committee(s)
- Timeline
- Content development
- Learning opportunity logistics (e.g., location, registration, etc.)

***Develop Project Management Plans and ensure that all LASC Team members follow a consistent process and have access to all relevant files.***

Project Management Plan		
	Description	Notes
<b>Planning Committee</b>	<ul style="list-style-type: none"> <li>• Members: List 3-5 people involved, which may include LASC team, partners, subject matter experts, target audience, CE provider, etc.</li> <li>• Roles/Responsibilities: Define roles such as content lead, logistics coordinator, etc.</li> </ul>	
<b>Timeline</b>	<ul style="list-style-type: none"> <li>• Key Dates: Identify important milestones (e.g., content drafts, event dates).</li> <li>• Notes: Are there any time-sensitive deadlines (e.g., legislation, policy changes)?</li> </ul>	
<b>Content Development</b>	<ul style="list-style-type: none"> <li>• Existing Training: Can existing training meet the needs?</li> <li>• New Content: Notes on what new content needs to be developed.</li> <li>• Alignment: How will this content align with other learning opportunities?</li> </ul>	
<b>Learning Opportunity Logistics</b>	<ul style="list-style-type: none"> <li>• In-Person/Virtual: Indicate whether the session will be in-person or virtual.</li> <li>• Logistics Notes: Consider venue, platform, accessibility, technology needs, registration process, and continuing education credits (CE).</li> </ul>	

*Step 2d. Engage participants through a Communications Plan*

[Refer to page 75 in Section 2.]

Once you've determined how your learning opportunity will be offered and how your intended audience will register, you can begin recruitment and marketing efforts. These, along with your plans for disseminating evaluation findings afterward, comprise your Communications Plan.

Use your previous work to guide you:

- In Phase 3, you identified your intended audience.
- In your Collaboration Plan, you documented who has connections with that audience.

Now, discuss what messaging and communication methods will best reach and engage your audience, and ***document your decisions using the space provided below***. See Section 3 for resources to support recruitment and marketing to adult learners.

Step 3: Develop an Evaluation Plan

*Step 3a. Evaluate individual learning opportunities*

[Refer to page 76 in Section 2.]

When planning any learning opportunity, it’s essential to develop a clear evaluation plan to assess its success. Your evaluation plan should consider the following:

- Process and outcome objectives
- Key evaluation questions you and your partners want to prioritize
- Evaluation methods and timelines
- How findings will be reported

***Use the template provided below or your own process to draft an evaluation plan for each learning opportunity.***

<b>Learning Opportunity &amp; Objectives</b> <i>Reference columns 3 and 5 of your Learning Plan from Phase 3 Step 2.</i>	<b>Audience</b> <i>Reference column 2 of your Learning Plan from Phase 3 Step 2.</i>	<b>Before Workshop</b>	<b>After Workshop</b>	<b>Follow-up</b>	<b>Dissemination of Findings</b>
Opportunity:  Objective:		Process Eval:  Outcome Eval:	Process Eval:  Outcome Eval:	Process Eval:  Outcome Eval:	
Opportunity:  Objective:		Process Eval:  Outcome Eval:	Process Eval:  Outcome Eval:	Process Eval:  Outcome Eval:	
Opportunity:  Objective:		Process Eval:  Outcome Eval:	Process Eval:  Outcome Eval:	Process Eval:  Outcome Eval:	

*Step 3b. Evaluate the comprehensive Learning Plan*

[Refer to page 78 in Section 2.]

Unlike individual learning opportunities that focus on short-term outcomes, your comprehensive Learning Plan targets mid-term outcomes aligned with the Six Conditions of Systems Change. Therefore, it's important to evaluate your Learning Plan as a whole.

**Process**

- Number and type of learning opportunities offered
- How well the learning needs were met
- Gaps that still need to be addressed

***Use the space below to document your notes about the process of implementing the learning opportunities in the Learning Plan.***

<b>Learning Plan Process Evaluation</b>	
<b>Number and type of learning opportunities offered</b>	
<b>How well the learning needs were met</b>	
<b>Gaps that still need to be addressed</b>	

**Outcome**

- Were the desired mid-term outcomes achieved?

***Use the space below to document your ideas for evaluating the mid-term outcomes in the Learning Plan.*** (Note: You do not need to fill out each row if the approach does not align with your team's Learning Plan. You can read more about each model in the Resources in Section 3)

<b>Learning Plan Mid-Term Outcome Evaluation</b>	
<b>Evaluation Models &amp; Approaches</b>	<b>Notes - Are there questions or approaches from this resource that will be helpful as your team tracks progress toward achieving our mid-term outcomes? (Note: refer to your logic model.)</b>
Organizational Culture Change	

Workforce Assessments	
Mindset Shifts	
Policy, Systems, and Environmental (PSE) Change	
Health in All Policies (HiAP)	
Health Equity Impact Assessments	
Inquiry Framework	
Other Resource:	
Other Resource:	

Step 4: Implement and evaluate your learning opportunities & Learning Plan

[Refer to page 80 in Section 2.]

Take a moment to celebrate — you’ve made it through a thorough, engaged planning process, and now it's time to put it into action! While implementing your plan may feel daunting, remember that your LASC team and partners will continue to support and build on these Learning Opportunities. The relationships and root cause problem-solving you've focused on are just as valuable as the learning itself. Stay flexible and look for ways to improve in future iterations as you implement and evaluate your Learning Plan.

*Step 4a. Disseminate Evaluation Findings*

[Refer to page 80 in Section 2.]

Consider how you will share your findings and reflect on the following questions:

- Do your intended audiences for these communications go beyond your intended audiences for learning? For example, what about your funders and coalition partners who assisted in the LASC process?
- What will be of interest to your various audiences?

***Use the space below to outline your plans for sharing your findings.***

A large, empty rectangular box with a thin black border, intended for the user to outline their plans for sharing findings. The box is currently blank.

Team Reflection

[Refer to page 81 in Section 2.]

Before moving on to Phase 5, reflect on your implementation plan partners, resources, and logistics. Consider the evaluation metrics your LASC team chose to prioritize at each evaluation stage. What do these decisions tell you about your shared values and mental models?

***Use the space below to document some of your team's reflections:***

A large, empty rectangular box with a thin black border, intended for the team to document their reflections. The box is currently blank.

## Phase 5: Reflect and Revise

Step 1: Reflect on your systems change leadership and Implementation Plan experiences

*Step 1a. Reflect on your LASC team's systems change leadership experience*

[Refer to page 84 in Section 2.]

**Work with your team to complete the systems change leadership discussion guide below.**

<b>Systems Change Leadership Discussion Guide - To what extent did our team leadership foster these systems change leadership concepts?</b>				
<b>Element of Systems Change Leadership</b>	<b>What Activities Did Your Team Do?</b>	<b>What Went Well?</b>	<b>What Was Challenging?</b>	<b>What would you change or improve?</b>
<p><b>Understand change as a process, your team's potential responses to change, and how to improve resilience.</b></p>	<p><i>How did we plan for resistance to change?</i></p> <p><i>Where did resistance come from?</i></p> <p><i>How did we respond?</i></p> <p><i>Who supported our efforts?</i></p>			
<p><b>Clarify the 'why' behind the change and ensure there is a clear, inspirational, focused 'future state' that all team members understand.</b></p>	<p><i>How did we articulate the "why" behind the change?</i></p> <p><i>What did we do to ensure others understood the "why" or the future state?</i></p>			

<p><b>Clarify roles and responsibilities in the change process.</b></p>	<p><i>How did we establish and clarify roles?</i></p> <p><i>Who served as the sponsor(s), change agent(s), target(s), and advocate(s)?</i></p>			
<p><b>Communicate and communicate again.</b></p>	<p><i>What strategies did we use to communicate?</i></p> <p><i>How did we communicate differently with different audiences?</i></p>			

*Step 1b. Reflect on your Implementation Plan experience*

[Refer to page 85 in Section 2.]

**Work with your team to complete the Implementation Plan discussion guide below.**

<b>Implementation Plan Discussion Guide</b>				
<b>Implementation Plan Element</b>	<b>What activities did your team do?</b> <i>What was the process like for developing the ____ plan? How did your team go about developing the ____ plan?</i>	<b>What went well?</b> <i>As you consider the implementation of the ____ plan, what went well?</i>	<b>What was challenging?</b> <i>As you consider the implementation of the ____ plan, what was challenging?</i>	<b>What would you change or improve for your next LASC cycle?</b> <i>As you consider the implementation of the ____ plan, what would you change or improve?</i>
<b>Collaboration Plan</b> <i>(Consider the elements of the planning and design of the learning opportunities, the hosting, recruitment of participants, and the subject matter experts)</i>				
<b>Resource Plan and Budget</b>				
<b>Project Management Plan</b> <i>(Consider the elements of planning committees, timeline, content development, and learning opportunity logistics)</i>				

<b>Communications Plan</b>				
<b>Evaluation Plan</b> ( <i>was an evaluator brought in early, are areas of evaluation missing, were data gathering plans sufficient</i> )				

Step 2: Reflect on evaluation data and agree on the revised desired state

*Step 2a. Reflect on short-term process and outcome evaluation data*

[Refer to page 85 in Section 2.]

**Work with your team to complete the learning opportunity evaluation data discussion guide below.**

<b>Learning Opportunity Evaluation Data Discussion Guide</b>			
<b>Gather evaluation data for reflection</b>	<b>What were the evaluation summary points?</b>	<b>What does the evaluation data mean for your next LASC process? What might be changed in future LASC Learning Opportunities given these results?</b>	<b>What decisions could be made now for improvement?</b>
<b>Process Metrics</b>			
<b>Knowledge/Skill/Attitude Outcome Metrics</b>			

Step 2b. Reflect on the comprehensive Learning Plan

[Refer to page 85 in Section 2.]

**Work with your team to complete the Learning Plan evaluation data discussion guide below.**

<b>Learning Plan Evaluation Data Discussion Guide</b>		
<b>What gaps still exist? To what extent did the individual learning opportunities within your plan build upon each other to address the six conditions of systems change?</b>	<b>What might be changed in future LASC Comprehensive Learning Plans given these results?</b>	<b>What decisions could be made now for improvement?</b>

Step 2c. Reflect on mid-term outcomes

[Refer to page 85 in Section 2.]

Work with your team to complete the mid-term outcome evaluation data discussion guide below.

<b>Mid-Term Outcome Evaluation Data Discussion Guide</b>				
<b>Condition of Systems Change</b>	<b>Possible LASC Process Evaluation Questions</b>	<b>What went well/what changed for this condition of systems change? (Celebrate small wins!)</b>	<b>Why do you think this change occurred/didn't occur?</b>	<b>What improvement would you make to the learning opportunity or LASC process to increase the impact of your work?</b>
<b>Policies</b>	<i>Where did policy change occur/not occur? What served as facilitators or barriers to policy change? How did organizational policies facilitate or impede the LASC process?</i>			
<b>Practices</b>	<i>Where did practice change occur/not occur? Why do you think that was? How was the LASC process aligned with other existing plans and processes? Where are there still opportunities for improved alignment and integration? How did organizational practices facilitate or impede the LASC process?</i>			

<b>Resource Flows</b>	<p><i>In what ways did resource flows change or not? Were necessary resources available (human, financial, data, technology)? If not, what opportunities are there to get them? Are resources available to sustain your momentum? What knowledge was needed by the LASC team to be ready to implement the LASC process (e.g., systems thinking)? What new knowledge is needed before the next iteration? How can you aim for deeper levels of impact in your next iteration of the LASC?</i></p>			
<b>Relationships &amp; Connections</b>	<p><i>How did relationships impact your outcomes? What partners were included in your LASC process, when, and how? How effective was communication between partners?</i></p>			

	<p><i>What opportunities are there to continue building trust?</i></p> <p><i>Who else should be engaged in the next iteration?</i></p>			
<b>Power Dynamics</b>	<p><i>What changes in power were achieved?</i></p> <p><i>Was power or influence gained by any groups?</i></p> <p><i>What was the outcome?</i></p> <p><i>Who was involved in decision making during your LASC process?</i></p> <p><i>In what ways did that impact the outcomes?</i></p> <p><i>How was equity considered throughout your LASC process?</i></p> <p><i>How was leadership, power, and decision making shared?</i></p>			
<b>Mental Models</b>	<p><i>What assumptions were challenged as part of this process? Whose assumptions were challenged? What changes, if any, resulted from shifts in beliefs or mindsets? What does the continuation of this work look like? What new questions do you have?</i></p>			

*Step 2d. Decide if, how, and why the desired state might change*

[Refer to page 86 in Section 2.]

1. What are 3-4 overall findings from your evaluation of your LASC Learning Plan?
2. What evidence suggests that you made progress to achieve your desired state?
3. What evidence suggests you are ready to revise your desired state OR select a new sub-factor in your next LASC cycle?
4. What are your early thoughts on if and how you might change your desired state or select a new sub-factor? How would you change your desired state based on your evaluation data? OR, what new sub-factor might you select and why?

***Use the space below to capture any insights from your team's discussion.***

Step 3: Assess LASC team readiness as an effectively functioning team focused on systems change

*Step 3a. Assess your LASC team for Five Key Actions of High Performing Teams Focused on Systems Change*

[Refer to page 87 in Section 2.]

**Work with your team to complete the team functioning discussion guide below.**

<b>Elements of Team Performance</b>	<b>Where did you start as a team in these team effectiveness concepts?</b>	<b>What happened during the LASC cycle to apply or learn about this team effectiveness concept?</b>	<b>What did you learn about this concept?</b>	<b>What more do you need to learn for your next LASC cycle?</b>
<b>Team Development: Build and strengthen an effective team</b>				
<b>Team Facilitation: Establish team facilitation and group norms</b>				
<b>Process management: Develop plans to implement and evaluate process</b>				

*Step 3b. Assess current team readiness against each of the LASC principles*

[Refer to page 87 in Section 2.]

**Work with your team to complete the four Foundational LASC Principles discussion guide below.**

<b>Four foundational LASC Principles</b>	<b>Where did you start as a team in readiness for these principles?</b>	<b>What happened during the LASC cycle to apply or learn about this principle?</b>	<b>What did you learn about this principle?</b>	<b>What more do you need to learn for your next LASC cycle?</b>
<b>Equity</b>				
<b>Systems Thinking</b>				
<b>Engagement</b>				
<b>Leadership</b>				

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***Congratulations!** You have completed your first LASC cycle! Be sure to find a way to celebrate your hard work and learning with your LASC team and partners.*

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  - Ohio Association of Community Health Centers
  - Oral Health Progress and Equity Network
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