

In *Reclaiming the Great Commission*, Fr. Evan Armatas outlines a strategic, repeatable process for building a **Parish Health Plan**. Rather than treating strategic planning as an administrative burden, he frames it as a practical tool to overcome "spiritual laziness" and align parish activities directly with the Great Commission.

The development of the plan follows these core operational steps:

1. Honest Diagnosis and Self-Assessment

Before charting a path forward, leadership must conduct a candid evaluation of the church's current baseline:

- **Audit current activities:** Examine whether existing programs, meetings, and expenditures serve outward-focused ministry or internal maintenance.
- **Identify barriers:** Pinpoint physical, cultural, and administrative obstacles that prevent visitors from being welcomed or laypeople from getting involved.
- **Acknowledge red flags:** Evaluate hard data—such as baptism-to-funeral ratios, dependence on fundraisers, and meeting agendas dominated by "putting out fires"—to understand the true state of parish health.

2. Establishing Core Identity and Purpose

A Parish Health Plan cannot succeed without a clear mission. This step involves:

- **Refocusing on the Great Commission:** Shifting the primary identity of the parish back to making disciples, rather than acting as a social club or cultural preservation society.
- **Writing a Mission Statement:** Crafting a concise, shared vision statement that defines what the parish exists to do.

3. Setting Clear Expectations for Engagement

Rather than relying on vague calls for volunteers, the plan establishes explicit standards for parish participation:

- **Tithing Time and Talent:** Encouraging parishioners to commit specific gifts, time, and service to the community.
- **Empowering the Laity:** Structuring ministries so lay members can launch and lead small groups, fellowship efforts, and outreach programs. This frees the clergy to focus on pastoral and spiritual care.

4. Setting Measurable Goals and Timelines

To prevent the vision from remaining purely theoretical, leadership breaks down the plan into targeted objectives:

- **Actionable Milestones:** Defining short-term (months) and long-term (1–3 years) goals across key health areas (e.g., visitor reception, educational programs, facility cleanliness, financial stewardship).
- **Assigning Accountability:** Designating specific leaders or committees to oversee each element of the plan.

5. Managing Change and Navigating Resistance

Armatas emphasizes that resistance to organizational change is normal and expected. The plan must include strategies to:

- Address inertia, fear, or pushback directly rather than avoiding conflict.
- Maintain focus on the broader vision when faced with institutional pushback.

6. Continuous Review, Reflection, and Repentance

The Parish Health Plan is meant to be a living, adaptable document rather than a shelf piece:

- **Regular Audits:** Meeting annually (or bi-annually) to evaluate what succeeded, what failed, and why.
- **Repentance and Realignment:** Using end-of-chapter review frameworks for parish councils to reflect on missteps, adjust strategies, and re-seek spiritual direction.