

Replace this image
with your logo.

HEALTH LITERACY ACTION PLAN

[Type Organization Name Here]



FOCUS AREA 1: PERFORMANCE MANAGEMENT			
SMART Goal	Target Completion Date	Point of Contact for follow-up <i>Name, phone number, & email</i>	Comments

FOCUS AREA 2: POLICIES & PROCEDURES			
SMART Goal	Target Completion Date	Point of Contact for follow-up <i>Name, phone number, & email</i>	Comments

Replace this image
with your logo.

HEALTH LITERACY ACTION PLAN

[Type Organization Name Here]



FOCUS AREA 3: COMMUNITY PARTNERSHIPS			
SMART Goal	Target Completion Date	Point of Contact for follow-up <i>Name, phone number, & email</i>	Comments