

Strategic Planning Framework for Academy Project with the Office of Urban Indian Health Programs

The aim of the Academy Panel in this project is to support the Indian Health Service (IHS) Office of Urban Indian Health Programs (OUIHP) in its efforts to develop a strategic plan. The role of the Panel is to provide the staff of OUIHP with guidance grounded in established theory, leading practice, and applicable federal government requirements, together with its expert judgment.

The guidance presented in this framework is adapted to reflect the particular circumstances of the strategic planning effort being undertaken by OUIHP. First, strategic planning generally is undertaken by Departments and large independent agencies, not by an office within a small component agency. Second, the IHS does not have a current strategic plan to which the OUIHP can link its plan. IHS is in the process of developing a strategic plan, a decade after the completion of its last plan for FY 2006-2011. Third, OUIHP is a small organization (5 full-time staff positions, 4 filled) that depends primarily on contractors to carry out mission operations, and on parent agency employees with other duties to carry out important administrative tasks in the field. Fourth, OUIHP is required by statute to formally “confer” with organizations designated as Urban Indian Organizations (UIOs)¹ on budget and policy matters. This requirement applies to the development of strategic plan. Meeting this requirement presents a significant challenge, given that UIOs include hundreds of diverse organizations across the country.

This framework is organized into two sections. The first section provides guidance on the strategic planning process. It draws primarily on John M. Bryson, *Strategic Planning for Public and Nonprofit Organizations*, 4th Edition (2011), a leading text on the concepts and practice of strategic planning in the public sector. The second section provides guidance on the elements to be included in the strategic plan based on applicable federal requirements set out in Office of Management and Budget (OMB) Circular A-11, 2015.

STRATEGIC PLANNING PROCESS

Guidance on the strategic planning process is organized around six steps. However, a review of these steps is preceded by a discussion of stakeholders given the importance of engaging stakeholders throughout the process.

¹ According to 25 USCS § 1603 [Title 25. Indians, Chapter 18. Indian Health Care, General Provisions] the term, “Urban Indian organization” means “a nonprofit corporate body situated in an urban center, governed by an urban Indian controlled board of directors, and providing for the maximum participation of all interested Indian groups and individuals, which body is capable of legally cooperating with other public and private entities for the purpose of performing the activities described in section 503(a).”

STAKEHOLDER ANALYSIS AND ENGAGEMENT

Identifying the key internal and external stakeholders, understanding their perspective and interests, and engaging them effectively throughout the process is fundamental to a successful strategic plan.

Looking beyond the small OUIHP headquarters staff, there are two internal stakeholder groups to consider: (1) IHS employees who serve as Area Urban Coordinators, and (2) Urban Indian Health Programs (UIHPs). UIHPs are non-profit organizations funded by IHS under Title V of the Indian Health Care Improvement Act to provide healthcare to urban Indians. Currently, IHS funds 34 of these organizations. Although UIHPs are external to the OUIHP (they are not part of OUIHP or IHS), they are “the program” in the practical sense of carrying out mission operations, while the agency plays a supporting role.

There are at least three groups of external stakeholders to be considered.

- Urban Indian Organizations (UIOs). For the purpose of this project, we have tentatively divided UIOs into 2 sub-groups:
 - UIOs that deliver healthcare services, but are not funded by OUIHP under Title V
 - UIOs that do not deliver health services, but must be included in some way in a formal confer process
- Funding/regulatory entities. These include external stakeholders that exercise influence over resources through funding and/or regulatory roles, such as Congress; OMB; IHS; Health Resources and Services Administration (HRSA), which contributes funds to some of the 34 UIHPs; and the Centers for Medicaid & Medicare Services (CMS).
- Patients/customers of UIHP services.

The project team is beginning the process of developing a plan for identifying, analyzing, and engaging stakeholders in the strategic planning process. This plan will include a sub-plan for engaging the different groups of UIOs that satisfies the confer requirement, but reflects the relative interest of these groups and importance of their input to achieving the purpose of the project. For instance, we anticipate engaging the current 34 UIHPs through a series of group discussions organized around considerations still to be determined (e.g., type of UIHPs), but plan to use individual interviews with the leadership of the four UIOs currently delivering healthcare services in urban areas where program expansion is being considered. Most UIOs are not significantly engaged in healthcare delivery and might be engaged through a formal letter of notification that offers the opportunity for input.

STRATEGIC PLANNING STEPS

Guidance on strategic planning is organized around six steps that extend from reaching agreement on the process through the formulation of a strategy, including the development of a strategic plan. Each step and the linkages among them are discussed below.

Step 1: Reaching Agreement on the Strategic Planning Process

This step entails reaching agreement on such things as desired outcomes, how and when different stakeholders will be engaged, requirements for success, and important limitations or boundaries of the effort. Agreement on such issues usually cannot be reached at a single meeting, but generally requires an iterative process during which key stakeholders are identified and their values and expectations considered. The success of a strategic planning process depends on the buy-in of key stakeholders, who need to both support the process and help ensure actions are taken to realize the resulting strategic plan.

The current project was directed by Congress and certain aspects are defined by contract between the Academy and the agency. However, we are still engaged in a process of determining how the strategic planning process should be organized and what the strategic plan should address. To date, this has involved ongoing conversations with OUIHP staff and initial confer sessions with members of the UIHP community.

In conversations with the project team, OUIHP leadership has emphasized that a strategic plan should not focus narrowly on the OUIHP, but should look more broadly at shared challenges facing UIHPs and identify actions that might be taken to help address these challenges and enable and enhance the performance of UIHPs. In short, it should be useful to UIHPs.

However, participants in initial confer sessions have expressed concern that a strategic plan might involve top-down direction by the OUIHP about how individual UIHPs should run their operations. They have emphasized the diversity of UIHPs and the importance of flexibility to meet the need of local communities. The project team has tried to assuage these concerns and articulate the approach discussed with OUIHP leadership. We have emphasized that the aim of the project is not to develop a top-down, one-size-fits-all plan, but to systematically obtain input from UIHPs and the broader UIO community about shared challenges and what might be done to address them.

Step 2: Identifying Organizational Mandates

This step entails identifying both the formal mandates (e.g., statute, policy, regulation, contracts) and informal mandates (i.e., stakeholder expectations) that significantly affect what the organization does and how. It is important to understand the particular demands of these mandates to ground the somewhat abstract process of articulating an organization's mission.

One example of a formal mandate in the case of OUIHP is the stated goal of funding awarded to UIOs under Title V to help build full ambulatory programs. Depending on how it is interpreted, this mandate could channel the efforts of UIHPs in ways that may not be helpful in realizing the full potential to improve the health of urban Indian populations in the context of a rapidly changing healthcare landscape.

Step 3: Clarifying Organizational Mission and Values

This step entails articulating as clearly as possible the public purposes an organization aims to achieve and the values that define its approach to carrying out this mission.

The OUIHP is an office within a component agency (IHS) of a Department (HHS). While the agency, the IHS, aims to improve the health of American Indians and Alaska Natives generally, the OUIHP is focused, as its name implies, on those American Indians and Alaska Natives living in urban areas. OUIHP has not formally articulated a distinct mission but in a recent draft planning document, OUIHP adopts the IHS mission statement, which is “to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level.”

Step 4: Identify Strengths, Weaknesses, Opportunities, and Risks²

As part of our assessment of strengths and weaknesses, we will examine the resources and processes OUIHP uses to fulfill its mission and meet its mandates. Also, we will examine available performance information (e.g., GPRA performance measures).

We propose to consider the strengths and weaknesses of the OUIHP and the UIHPs. As noted earlier, UIHPs are external to OUIHP, but they are “the program” in the practical sense of carrying out mission operations, while the agency plays a supporting role. Ultimately, it is the strengths and weaknesses of the UIHPs, individually and as a group that will determine the performance of the OUIHP mission.

During the Academy team’s discussion with UIHPs at the NCUIH conference, participants identified several weaknesses among UIHPs individually and as a group. These include: overreliance on IHS funding, weak governance, and the limited use of networking among UIHPs to enable staff to tap expertise available across UIHPs. Such networking was seen as especially important in helping to mitigate the impact of staff turnover and facilitating the sharing/application of best practices (e.g., use of data to improve performance).

A commonly identified strength of UIHPs is “cultural competence” and relationships of trust with urban Indian communities. These are seen as key to connecting urban Indians to healthcare and providing it in a way that is most likely meet their needs.

With regard to the OUIHP, one weakness identified was its small staff and limited direct control over important resources for carrying out its mission. A potential strength may be its position within HHS, where most of the funding resources available to UIHPs reside.

In our assessment of opportunities and risks facing OUIHP and UIHPs, we will examine key aspects of the external environment including:

- Trends and developments (e.g., expansion of insurance/Medicaid coverage under the Affordable Care Act (ACA); trends toward integrated health care networks/outcome-based payment models)

² Leading practice in strategic planning is to undertake a SWOT analysis. That is an assessment of strengths, weaknesses, opportunities, and threats. Threats are often confused with risks. To be clear, we use the term risk and distinguish between the two. Threats are anything with the potential to adversely affect performance. Risk is defined by the *probability* of a threat being realized *multiplied by the consequences*, which depend on vulnerability to the threat. Therefore, analysis should not only identify potential threats but consider the likelihood of adverse developments, and identify weaknesses creating vulnerability to the threat.

- Stakeholders, especially those that affect resources (directly or indirectly), such as customers, clients, payers or funders, regulators and relevant policy bodies (e.g., Congress, IHS, HRSA, CMS, state health insurance programs)
- Actual/potential competitors and collaborators (e.g., Tribal and IHS facilities, private and public health care providers)³

A major opportunity is presented by IHS development of the integrated data collection system data mart, which will enable validation of performance data reported by UIHPs that do not use IHS' Resource Patient Management System (RPMS). This will provide OUIHP with validated performance data of all of the UIHPs it funds and thereby provide a solid basis for evaluating program performance and informing decisions about the allocation of funding across centers. The data mart project can also be considered a risk in the sense that its failure or delay imperils any plans premised on its success.

UIHPs have complained about the slowness of IHS in adapting RPMS to meet new health IT and billing requirements. This may be seen as a significant risk to UIHP performance.

The expansion of health insurance and Medicaid coverage under the Affordable Care Act (ACA) and other federal funding available offers opportunities to improve the financial sustainability of UIHPs. Trends toward integrated health care networks/outcome-based payment models can be seen as threatening to marginalize UIHPs. But they might also be seen as an opportunity. For example, UIHPs might focus on particular areas of strength (e.g., an integrated approach to treating behavior-related chronic diseases) while partnering with other providers as appropriate to help patients access the broader continuum of care they need. (Note: While formulating such strategies is the prerogative of individual UIHPs, an understanding of such strategies and related practices can inform supportive actions that might be undertaken by OUIHP.)

Social media offer an opportunity for UIHPs to build community resources. These tools might include online communities of interest that can help mitigate knowledge loss from staff turnover and enable sharing of leading practices.

Step 5: Identify Strategic Issues

This step entails identifying and articulating the strategic issues facing an organization. In the case of this project, we propose to work with OUIHP staff, drawing on input from UIHPs and other stakeholders, to identify the key strategic issues facing OUIHP and UIHPs as a community.

Strategic issues are fundamental policy questions or critical challenges with the potential to significantly affect the nature and performance of an organization. They generally involve

³ UIHPs operate within a larger healthcare community including Tribal and IHS facilities on nearby reservations, and diverse networks of private and public healthcare providers in urban areas that may present both competition with UIHPs and opportunities for collaboration. The implementation of ACA and related trends in healthcare are reshaping these patterns of competition and collaboration.

conflicts that may relate to ends (what); means (how or how much); philosophy (why); location (where); timing (when); and (who) might be advantaged or disadvantaged by different ways of resolving the issue.

The determination of whether an issue is strategic should include the following questions:

- Is it something the organization can feasibly address?
- What are the factors that make the issue a fundamental challenge?
- What are the consequences of failure to address the issue?

Key to addressing the first question is an understanding of the obstacles that must be surmounted to achieve desired changes. In addition to inadequate funding, these obstacles may include policy, processes, technology, and personnel. Also, it is important to emphasize the constraints imposed by the small size of OUIHP and its limited control over the operations of UIHPs.

A strategic issue facing OUIHP is how to allocate funds in ways that will have the greatest positive impact on urban Indian health. However, addressing such an issue would require reliable information on the needs of urban Indian populations in different parts of the country and the capabilities and performance of UIOs. In the case of performance information, UIHPs report data on a set of GPRA clinical performance measures, but because not all UIHPs collect and report data on these measures using the agency's data management system, data from some UIHPs cannot be validated and therefore do not provide a reliable basis for measuring performance. This gap suggests a second-order issue of how to systematically collect reliable data on the performance of all UIHPs. This is an issue that can reasonably be addressed, and, in fact, is the focus a major technology investment by IHS.

A strategic issue facing UIHPs as a group is whether and how they might build community resources. Another related issue concerns the role OUIHP might play in such an effort.

Step 6: Formulate Strategies to Deal with Issues Identified

This step begins with identifying the general approach to addressing strategic challenges identified. This approach should build on an understanding of the particular strengths and weaknesses of OUIHP and of the UIHPs as a group. For instance, what is OUIHP well-positioned to do? What resources (e.g., authorities, relationships, expertise) can it draw upon? Are there UIHP community resources that can be built upon?

Next, a concrete plan of action should be developed. This plan should identify the following:

1. Major actions to achieve goals directly or indirectly (by addressing constraints/removing barriers).
2. Key linkages/dependencies among actions and mechanisms to ensure coordination.
3. Actions needed in the medium term
4. Actions to be taken in the near term (e.g., next 6 months to a year), both to address immediate challenges and to demonstrate progress.

ELEMENTS OF A STRATEGIC PLAN

Guidance on the elements to be included in the strategic plan is drawn from federal requirements set out in OMB Circular A-11, 2015. However, these guidelines were developed for Departments and large independent agencies that are required to develop a strategic plan under the Governmental Performance and Results Modernization Act. Not all these guidelines are relevant to OUIHP, which is an office in a small component agency of the Department of Health and Human Services. A limited set of elements selected and adapted for relevance is summarized in the table below.

Information on the Office and Mission
Overview. A summary description of the office, which may include core functions, organizational size, and key legislative authorities or initiatives.
Mission Statement. The mission statement should briefly define the basic purpose of the office.
Stakeholder Engagement. Summarize the office's strategy for stakeholder outreach, including any relevant congressional engagement.
Strategic Goals
Strategic Goals. General, outcome-oriented, long-term goals for the office that address the broader impact that is sought by the office.
Strategic Goal Overview. For each goal, the office should briefly describe the following: <ul style="list-style-type: none"> • The opportunity or problem being addressed by the strategic goal • Why the goals were selected, such as the problems necessitating the goal, opportunities being pursued, legislative mandates, and Presidential directives
Strategic Objectives
Strategic Objectives. Strategic objectives reflect the outcome or management impact the office is trying to achieve and generally include the office's role. Objectives are tied to a set of performance goals and indicators established to help the office monitor and understand progress.
Strategic Objective Overview. For each strategic objective, the office should briefly describe the following: <ul style="list-style-type: none"> • The opportunity or problem being addressed by the strategic objective and characteristics of the problem or opportunity • Why the objective was selected
Strategies for Objectives. These are plans to make progress on strategic objectives.
Programs Contributing to Strategic Objectives. As appropriate, identify the organizations, regulations, tax expenditures, program activities, policies, and other activities, both within and external to the office, that contribute to each objective and how they fit into strategies for making progress.
Other Information
Major Management Priorities, Challenges, and Risks. This section should highlight the management issues and risks most critical to the office's mission delivery. Identify management objectives for addressing these issues. (Management objectives are a subset of strategic objectives and are generally crosscutting.)

Cross-Agency Collaborations. As a part of the discussion of strategies, describe how the office is working with its parent and other agencies to achieve strategic objectives.

Evidence Building. Describe efforts to build the evidence base, such as data collection and program evaluations. This might be addressed as a management objective.