



Indian Health Service

**Office of Urban Indian Health Programs  
2022-2026 Strategic Plan  
(FIRST DRAFT)**

## Table of Contents

<b>Acronyms and Abbreviations .....</b>	<b>1</b>
<b>Introduction.....</b>	<b>2</b>
<b>Background .....</b>	<b>2</b>
<b>2017 – 2021 OUIHP Strategic Plan Evaluation .....</b>	<b>3</b>
<b>SWOT Analysis.....</b>	<b>5</b>
<b>2022-2026 OUIHP Strategic Plan .....</b>	<b>6</b>
<b>Strategic Pillar Goals &amp; SMART Objectives .....</b>	<b>7</b>
<b>Implementation Plan.....</b>	<b>10</b>
<b>Next Steps: 90- Day Launch Plan .....</b>	<b>10</b>
<b>Conclusion .....</b>	<b>11</b>

## Acronyms and Abbreviations

Acronym	Abbreviation
AI/AN	American Indian/Alaska Native
CCUIH	California Consortium for Urban Indian Health
FMAP	Federal Medical Assistance Percentage
FQHC	Federally Qualified Health Centers
HHS	Department of Health and Human Services
HIT	Health Information Technology
IDCS	Integrated Data Collection System
IHCIA	Indian Health Care Improvement Act
IHS	Indian Health Service
NCUIH	National Council of Urban Indian Health
OBRA	Omnibus Budget Reconciliation Act
OUIHP	Office of Urban Indian Health Programs
TA	Technical Assistance
UDS	Uniform Data System
UIOs	Urban Indian Organizations
VA	Department of Veterans Affairs
WIC	Women, Infants and Children

## Introduction

The Indian Health Service (IHS) is the Federal agency with primary responsibility for the health care and health advocacy of American Indian and Alaska Native (AI/AN) people. The mission of the IHS is to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level. The provision of health services to AI/AN people is based on a long history of government-to-government relationships between Tribes and the Federal government and is recognized in the U.S. Constitution, numerous treaties, statutes, Federal case law, regulations, and executive orders. The IHS provides a comprehensive health service delivery system that includes the provision of health services through the direct services, contracts and compacts with Indian Tribes and Tribal Organizations via the Indian Self-Determination and Education Assistance Act, and contract and grant funding to Urban Indian Organizations (UIOs) via the Indian Health Care Improvement Act (IHCIA).<sup>1</sup>

The IHS provides oversight of the grants and contracts to UIOs, with the purpose of making health services more accessible to Urban Indians. The IHCIA directed the establishment of an office within IHS to provide central oversight of the programs and services authorized by the IHCIA and to carry out the IHCIA provisions relating to Urban Indian health. The IHS established the Office of Urban Indian Health Programs (OUIHP) at IHS Headquarters to carry out these duties. The OUIHP, working with IHS Area Offices and IHS Headquarters program offices, oversees the program under which IHS currently awards contracts and grants to 41 UIOs that provide health care services to Urban Indians.

The OUIHP programmatic decision-making is guided and organized through the development of strategic plans. Each programmatic strategic plan aims to support the overall IHS mission and OUIHP goals to support stakeholder needs. The 2022-2026 OUIHP Strategic Plan (Strategic Plan) was drafted by OUIHP with the assistance of an external evaluator and in close collaboration with key stakeholders through Urban Confer and Tribal Consultation. This document summarizes the planning activities and provides a framework for moving forward to achieve the IHS's mission for the next five years by focusing upon five major strategic pillars. A detailed implementation plan will be developed within the OUIHP for each major strategic pillar.

## Background

There are currently 41 non-profit UIOs nationwide funded through grants and contracts from the IHS. IHS funded UIOs are automatically eligible for Federally Qualified Health Centers (FQHC) designation. Thus, in addition to IHS funding, approximately 45% of the UIOs receive Medicaid reimbursement as FQHCs and others receive fees for service under Medicaid for allowable services (i.e., behavioral health services, patient transportation, etc.). Over \$28.8 million dollars are generated by the UIOs in other revenue sources.<sup>2</sup>

The range of IHS/Urban grant and contract programs provided in facilities owned or leased by UIOs include:

- health information resources
- outreach and referral
- dental services
- traditional healing and medicine
- comprehensive primary care services
- limited primary care services
- community health

<sup>1</sup> Title V of Pub. L. No. 94-437, 102 Stat. 4820 (1988) (codified as amended at 25 U.S.C. §§ 1651-1660i)

<sup>2</sup> Indian Health Service. (N.D.) *Office of Urban Indian Health Programs*. Retrieved from <https://www.ihs.gov/urban/>

- substance use (outpatient and inpatient services)
- behavioral health services
- immunizations
- health promotion and disease prevention
- HIV activities and other health programs funded through state, federal, and local resources

The previous OUIHP Strategic Plan covered a 5-year timespan from 2017 to 2021.<sup>3</sup> The OUIHP used a strategic plan to organize and focus resources in support of IHS and Urban Indian Organization initiatives and needs. For the 2017-2021 OUIHP Strategic Plan, extensive stakeholder engagement, including interviews with nearly all UIOs funded under the IHS, provided input on the plan's goals and strategies. Since the implementation of the 2017-2021 OUIHP Strategic Plan, it is necessary to evaluate it in a way that highlights the achievements marked in the plan, the effect it had on involved organizations, and to re-direct activities and resources, if necessary.

## 2017 – 2021 OUIHP Strategic Plan Evaluation

This section summarizes the findings from the 2017-2021 OUIHP Strategic Plan evaluation. Between January and February 2022, an evaluation was conducted to determine the extent OUIHP implemented and completed the 2017-2021 OUIHP Strategic Plan priorities according to the set timeline. The evaluation included a review of organizational documents related to strategic plan implementation, feedback from focus groups with UIOs and IHS staff, and a review of strategic plan goal and objective implementation.

The 2017-2021 OUIHP Strategic Plan had two overarching goals:

1. To support currently IHS-funded UIOs in their efforts to address the key challenges they identified for improving and expanding their capacity to provide access to quality, culturally competent health services.
2. Increase OUIHP's administrative capacity.

For each goal, there were identified accomplishments. Accomplishments are activities or events that occurred within the 2017-2021 OUIHP Strategic Plan timeframe and had evidence of meeting a set of short-term and long-term outcomes. Short-term and long-term outcomes and corresponding indicators were determined with OUIHP and stakeholders during focus groups to assess accuracy and reliability to set progress benchmarking. Table 1 represents some of the accomplishments from the evaluation.

---

3

[https://www.ihs.gov/sites/urban/themes/responsive2017/display\\_objects/documents/IndianHealthServiceOfficeofUrbanIndianHealthProgramsStrategicPlan.pdf](https://www.ihs.gov/sites/urban/themes/responsive2017/display_objects/documents/IndianHealthServiceOfficeofUrbanIndianHealthProgramsStrategicPlan.pdf)

**Office of Urban Indian Health Programs 2022-2026 Strategic Plan  
(FIRST DRAFT)**

**Table 1. 2017-2021 Strategic Plan accomplishments by goal from the evaluation**

Goal 1: To support currently IHS-funded UIOs in their efforts to address the key challenges they identified for improving and expanding their capacity to provide access to quality, culturally competent health services.	Goal 2: Increase OUIHP’s administrative capacity
<ul style="list-style-type: none"> <li>• Legislation passed for 100% Federal Medical Assistance Percentage (FMAP) for two years</li> <li>• Legislation passed for reimbursement from the Department of Veterans Affairs (VA)</li> <li>• Legislation passed for Federal Tort Claims Act coverage</li> <li>• Legislation passed to remove accreditation requirements for UIOs’ facilities-related activities</li> <li>• Provided orientation, technical assistance, and training to Federal partners to strengthen and implement Urban Indian health priorities</li> <li>• Provided trainings via webinars/meetings</li> <li>• Provided technical assistance to UIOs, e.g., weekly office hours for information technology and electronic health record support</li> <li>• Provided access to accreditation training and technical assistance</li> <li>• Provided access to grant writing training and funding announcements</li> <li>• Congress increased Urban Indian health budget line-item to address UIOs’ needs</li> <li>• Congress provided COVID-19 funding supplements</li> <li>• Implemented Urban Confer for IHS and with Federal partners to seek input from UIOs</li> <li>• Collaborated with IHS Office of Human Resources on recruitment activities for UIOs, including the IHS job board, and Loan Repayment and Scholarship programs</li> <li>• Collaborated with other Federal agencies to work toward achieving objectives, including the Health Resources and Services Administration on the National Health Service Corps Loan Repayment and Scholarship programs</li> <li>• Created a UIOs’ facilities map for the IHS website</li> <li>• Provided budget formulation data, including the number of Tribes served to communicate the role of UIOs in serving Tribal communities</li> <li>• Leveraged two IHS cooperative agreements to address community health needs assessments,</li> </ul>	<ul style="list-style-type: none"> <li>• Transferred five former-National Institute on Alcohol Abuse and Alcoholism UIOs to OUIHP</li> <li>• Updated Urban Indian Organization annual on-site review manual</li> <li>• Standardized UIOs’ contract language and templates</li> <li>• Updated Uniform Data System (UDS) dashboard to capture verified data from 41 IHS-funded UIOs and added telehealth visits</li> <li>• Revised budget formulation dashboard to capture verified data from 41 IHS-funded UIOs</li> <li>• Provided workload summary reports to UIOs</li> <li>• Provided coronavirus disease testing and vaccine data to UIOs</li> <li>• Implemented first-ever national 4-in-grant program evaluation</li> <li>• Established standard methodology to distribute Urban Indian health funding increases</li> <li>• Improved the transparency of the Urban Indian health budget by providing an annual budget report</li> <li>• Filled key leadership positions of OUIHP Director and Deputy Director and filled six vacancies, including two Pathways interns</li> <li>• Leveraged Virtual Student Federal Service program to provide opportunities to five virtual interns</li> <li>• Leveraged cooperative agreement to address public policy; research and data; training and technical assistance; education, public relations, and marketing, as well as coronavirus disease public health support</li> <li>• Collaborated with other Federal agencies to work toward achieving objectives, including the Health Resources and Services Administration, Centers for Medicare &amp; Medicaid Services, Centers for Disease Control and Prevention, Substance Abuse and Mental Health Services Administration, Census Bureau, and the VA</li> </ul>

Indian Health Service  
**Office of Urban Indian Health Programs 2022-2026 Strategic Plan  
 (FIRST DRAFT)**

Goal 1: To support currently IHS-funded UIOs in their efforts to address the key challenges they identified for improving and expanding their capacity to provide access to quality, culturally competent health services.	Goal 2: Increase OUIHP’s administrative capacity
communities of learning, training, technical assistance, and peer to peer support	

The OUIHP made progress and continues to make progress meeting the IHS mission to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level. Substantial progress was made on objectives as evidenced by the document review and the OUIHP's progress reports. Overall, improvement is needed in the quality of measures and targets. Moving forward, it will be important for the OUIHP to establish regular communication with UIOs to report progress on the objectives within the strategic plan.

Four recommendations emerged from IHS and UIOs’ to improve future strategic planning. These include:

- develop specific, measurable, achievable, relevant, and time-sensitive (SMART) goals, objectives, and measures,
- create a theory of change that will guide the plan,
- create a communication plan for stakeholders to convey strategic plan status, and
- develop a dashboard to show strategic plan implementation progress.

Integrating these recommendations will ensure OUIHP and UIOs are clear about related responsibilities to meet planning goals and objectives.

## SWOT Analysis

In February 2022, a Strengths, Weaknesses, Opportunities, and Threats (SWOT)<sup>4</sup> analysis was conducted with the California Consortium for Urban Indian Health (CCUIH)<sup>5</sup> and National Council of Urban Indian Health (NCUIH).<sup>6</sup> The framing of the SWOT analysis considered the impact the OUIHP will have on Urban Indian health over the next five years, how the work of these organizations intersects with the OUIHP and how the OUIHP can support UIOs’ priorities. The results of these sessions are summarized in Table 2.

<sup>4</sup> SWOT (strengths, weaknesses, opportunities, and threats) analysis is a method for identifying and analyzing internal strengths and weaknesses and external opportunities and threats that shape current and future operations and help develop strategic goals.

<sup>5</sup> California Consortium for Urban Indian Health is a nonprofit 501(c)(3) statewide alliance of 10 Urban Indian Organizations. <https://ccuih.org/>

<sup>6</sup> The National Council of Urban Indian Health is the national non-profit organization devoted to the support and development of quality, accessible, and culturally-competent health and public health services for American Indians and Alaska Natives living in urban settings. <https://ncuih.org/>

**Table 2. SWOT analysis results from sessions with CCUIH and NCUIH**

OUIHP SWOT Analysis	
<p><b>OUIHP Strengths</b></p> <ul style="list-style-type: none"> <li>Understands the AI/AN community and are culturally sensitive</li> <li>Accessible and responsive to UIOs</li> <li>Provides technical assistance and resources</li> <li>Initiates confer</li> <li>Knowledgeable leadership and staff</li> <li>Provides good, consistent communication with UIOs</li> </ul>	<p><b>OUIHP Weaknesses</b></p> <ul style="list-style-type: none"> <li>Urban Indian health lacks parity with other priority areas in the Indian health system</li> <li>UIOs’ data are not accurately reflected</li> <li>Productivity is highly reliant on individual leadership</li> <li>Limited support for UIOs transitioning from an outreach and referral to ambulatory clinic</li> <li>Limited funding opportunities for UIOs</li> </ul>
<p><b>OUIHP Opportunities</b></p> <ul style="list-style-type: none"> <li>Redefine system of IHS, Tribal, and UIOs</li> <li>Champion innovative ideas through collaborations with other Federal agencies</li> <li>Growing focus in Congress and administration on Urban Indian issues</li> <li>Improve the UDS reporting system</li> </ul>	<p><b>OUIHP Threats</b></p> <ul style="list-style-type: none"> <li>Limited view of the Urban Indian health delivery system</li> <li>IHS/Federal changes in leadership</li> <li>Challenges in data collection causes misunderstanding of Urban Indian issues</li> <li>Health Information Technology (HIT) modernization delays</li> <li>Federal budget shortfalls</li> <li>Additional variants of the coronavirus disease</li> </ul>

Overall, the SWOT analysis indicated UIOs feel supported by the OUIHP; however, there are barriers that greatly impact the operations of UIOs. Fortunately, UIOs recognize opportunities to leverage advocacy efforts to support UIOs’ needs, including growing congressional support for Urban Indian issues. These results are helpful in identifying and planning priorities for the next 2022-2026 OUIHP Strategic Plan.

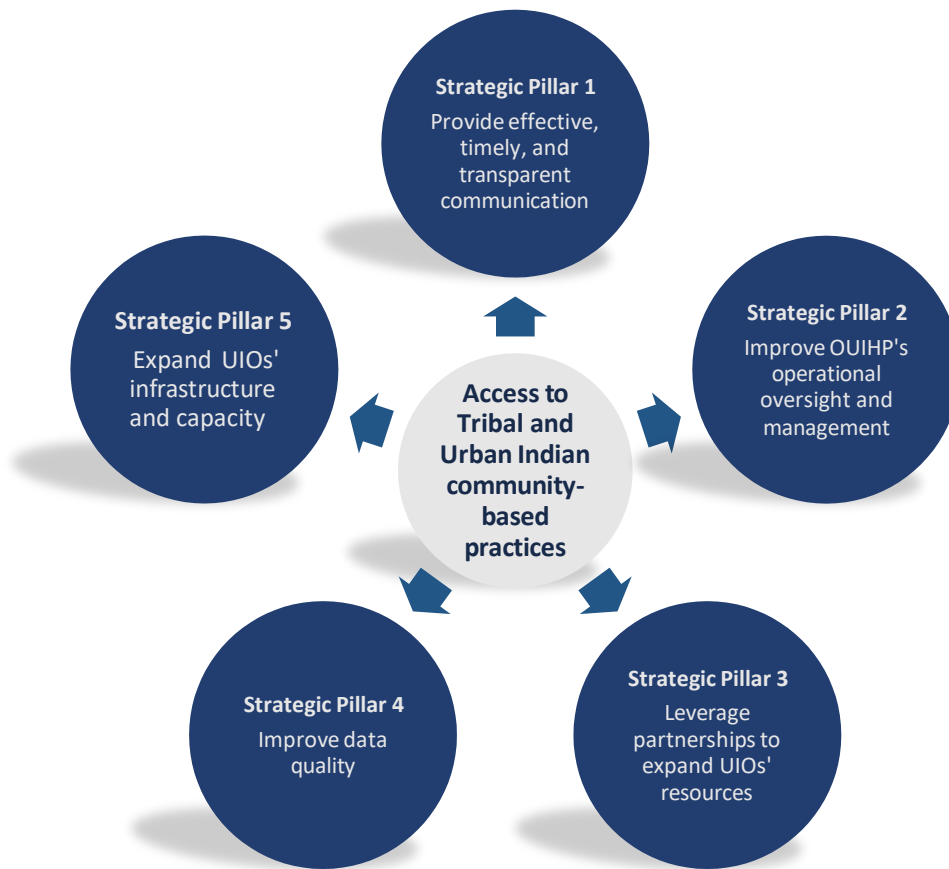
## 2022-2026 OUIHP Strategic Plan

The 2022-2026 OUIHP Strategic Plan will focus on growing and expanding OUIHP’s support of UIOs to meet their communities’ unique needs. To support UIOs, the OUIHP developed this section to guide programmatic action and decision-making, including strategic pillars, goals and objectives, and action steps.



The OUIHP recognizes the priorities of UIOs and the communities they serve. The OUIHP will achieve the IHS mission through communication and actions to promote health, wellness, and expand access to modern health care services, and collaborative partnerships. To help meet the IHS mission and support UIOs’ priorities, five strategic pillars were identified as foundational directions for the strategic plan. The strategic pillars are presented in Figure 1.

The OUIHP is committed to directing development and resources toward communication, operational oversight and management, partnership expansion, data quality, and UIOs’ infrastructure and capacity. Specifically, the OUIHP supports UIOs’ expansion, maximizing their resources by strengthening internal processes and tools, and leveraging partnership support and funding.



**Figure 1. 2022-2026 OUIHP Strategic Plan Pillars**

### Strategic Pillar Goals & SMART Objectives

To achieve the IHS mission, the OUIHP identified goals and objectives under each strategic pillar (See Table 3 through Table 7 below). These goals focus on planning and budgetary activities.

**Strategic Pillar 1: Provide effective, timely, and transparent communication**

The focus of strategic pillar one is to provide effective, timely, and transparent communication. The OUIHP acknowledges stakeholder engagement and building trust as priorities through internal and external communications.

**Table 3. Strategic pillar 1 goals and objectives**

Goals	Objectives
1. Ensure Urban Indian Organization stakeholders receive timely and accurate information	1. Deliver effective communication messaging to Urban Indian Organization stakeholders (time-sensitive, bundle, newsletter, etc.)
2. Ensure a relationship of trust and transparency between IHS and UIOs	1. Update the OUIHP communication plan annually through 2026, including IHS Offices and programs
3. Secure meaningful feedback from stakeholders to inform IHS decision-making	1. Effectively implement the Urban Confer policy across the IHS system 2. Provide technical assistance to other Federal agencies to better engage UIOs in a process similar to Urban Confer

**Strategic Pillar 2: Improve the OUIHP’s operational oversight and management**

The focus of strategic pillar two is to improve the OUIHP’s operational oversight and management. The OUIHP recognizes efficiency can be maximized when internal processes and tools support programmatic needs, including continuous learning on the part of staff and access to appropriate resources.

**Table 4. Strategic pillar 2 goals and objectives**

Goals	Objectives
1. Strengthen Urban Indian Organization annual on-site review manual and process	1. Roll out and implement the web-based application 2. Improve the annual on-site review process across IHS Areas
2. Continue to implement Urban Indian Organization contract templates	1. Provide training internally and externally on using the contract templates 2. Implement contract templates
3. Strengthen grant oversight and management	1. Conduct grant review for quality improvement and assurance on a quarterly basis

**Strategic Pillar 3: Leverage partnerships to expand UIOs’ resources**

The focus of strategic pillar three is to leverage partnerships to expand UIOs’ resources. The OUIHP supports securing health funding and financing on behalf of UIOs through technical assistance and education within the Federal government system.

Table 5. Strategic pillar 3 goals and SMART objectives

Goals	Objectives
<b>1. Support diversifying health funding and financing opportunities for UIOs</b>	<ol style="list-style-type: none"> <li>1. Provide technical assistance to the VA on implementation of the VA reimbursement agreement</li> <li>2. Provide technical assistance to the Centers for Medicare &amp; Medicaid Services on implementation of 100% FMAP</li> <li>3. Provide technical assistance on an All-Inclusive Rate</li> </ol>
<b>2. Ensure UIOs' provider needs are reflected in Federal health policy</b>	<ol style="list-style-type: none"> <li>1. Access to Federal resources and supplies</li> <li>2. Include UIOs as part of emergency response strategies</li> </ol>
<b>3. Recruit, develop, and retain quality staff across system</b>	<ol style="list-style-type: none"> <li>1. Provide technical assistance to the Health Resources and Services Administration on the Auto-Health Professional Shortage Area scores</li> <li>2. Work collaboratively with other IHS Offices and Federal agencies (loan repayment, scholarships, and National Health Service Corps)</li> </ol>

**Strategic Pillar 4: Improve data quality**

The focus of strategic pillar four is to improve data quality. The OUIHP supports access to health information technology and training for UIOs on the necessary tools.

Table 6. Strategic pillar 4 goals and objectives

Goals	Objectives
<b>1. Integrate electronic technology platforms to enhance data collection</b>	<ol style="list-style-type: none"> <li>1. Establish accurate, verifiable, and user-friendly data system</li> <li>2. Support leveraging Federal and private partnerships, and intermediaries to support and enhance data quality</li> <li>3. Support the enhancement of UIOs' dashboards (e.g., UDS, budget formulation, workload, and immunization) to promote data and data quality analysis and transparency in reporting</li> <li>4. Work with the National Patient Information Reporting System to remediate data that supports urban reference data, per the Standard Code Book</li> </ol>
<b>2. Partner with UIOs to improve data accuracy and quality</b>	<ol style="list-style-type: none"> <li>1. Partner with NCUIH data workgroup to improve UIO data reporting</li> <li>2. Work with UIOs on data mapping to the IHS national data warehouse</li> </ol>
<b>3. Train UIOs on data collection</b>	<ol style="list-style-type: none"> <li>1. Develop foundational electronic health record training materials</li> <li>2. Provide technical assistance and training webinars on electronic technology platforms (e.g., web-portal)</li> <li>3. Develop resource repository (trainings, templates, etc.)</li> </ol>

### Strategic Pillar 5: Expand Urban Indian Organization Infrastructure and capacity

The focus of strategic pillar five is to expand Urban Indian Organization infrastructure and capacity. The OUIHP understands the importance of infrastructure and technology needs of UIOs.

**Table 7. Strategic pillar 5 goals and SMART objectives**

Goals	Objectives
<b>1. Ensure UIOs’ infrastructure needs are identified and addressed</b>	1. Complete an Urban Indian Organization infrastructure study and provide individual Urban Indian Organization infrastructure assessment reports
<b>2. Modernize information technology to address UIOs’ needs</b>	1. Continued engagement of UIOs’ development and implementation of HIT modernization
<b>3. Expand UIOs’ capacity and reach to meet service population needs</b>	1. Support development and expansion of services provided by existing IHS-funded UIOs 2. Update the needs assessment for potential new UIOs in unserved urban centers

### Implementation Plan

An implementation plan was developed to support the steps needed to put the outlined goals and objectives into action. The implementation plan identifies a specific task for each goal and objective, assignments to carry out the work, and a completion timeframe. To track progress, the implementation plan has been developed in a separate workbook document.

### Next Steps: 90- Day Launch Plan and Next Steps

The establishment of internal protocols for monitoring implementation of the 2022-2026 OUIHP Strategic Plan in the first few months is a critical time. The first step is to determine implementation oversight responsibilities, which includes promoting the plan and/or identifying champions to promote the plan. In the first 90-days, specific steps provide orientation to the 2022-2026 OUIHP Strategic Plan and communicate the roles of OUIHP staff and partners. It also provides a calendar for establishing regular check-ins and reporting of progress. Figure 2 summarizes the 90-day launch plan for the 2022-2026 OUIHP Strategic Plan.



**Figure 2. OUIHP 90-day launch plan**

The OUIHP staff will orient IHS Offices and programs about the OUIHP 2022-2026 Strategic Plan to ensure assigned responsibilities are carried out. The OUIHP Leadership team will introduce the 2022-

2026 OUIHP Strategic Plan to IHS staff and review any assignments. A quarterly review of progress is crucial to avoid implementation stagnation and monitor activities. Annually, it will be important for the OUIHP team to convene and review the plan and adjust the plan as needed. Table 8 lists the activities that would occur during the quarterly and annual review meetings.

**Table 8. Progress check-in meeting activities, quarterly and annually**

Quarterly Progress Review Activities	Annual Progress Review Activities
<ul style="list-style-type: none"> <li>• Confirm and identify which action steps are active, complete, awaiting resources, or stalled.</li> <li>• Verify those responsible for an action step are fulfilling the requirements and meeting completion timeframes.</li> <li>• Ensure responsible staff for an action step have the necessary resources or work plan to complete the task.</li> </ul>	<ul style="list-style-type: none"> <li>• Review and assess the plan.</li> <li>• Develop a briefing report that outlines the plan’s achievements, areas for improvement, and proposed updates.</li> <li>• Revise the plan based on the progress reports from action step leads to reflect changes in needs or resources.</li> </ul>

## Conclusion

The OUIHP staff are committed to the successful implementation of the 2022-2026 OUIHP Strategic Plan. The OUIHP will work in close coordination with the other IHS Offices and programs and UIOs to implement the plan’s goals and objectives. These efforts are intended to support the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level.