

AMERICAN INDIAN/ALASKA NATIVE SUSTAINABILITY SELF-ASSESSMENT TOOL (CONTINUED)

Political and economic support	
	Process to assess the current and future economic health of the community, including job viability for families, is in place and considered as services are developed.
	Strong and positive relationships exist between SOC leadership and key tribal, state, and federal leaders.
	Tribal, state, and U.S. congressional elected officials respect and know the tribal SOC.
	Process to assess leadership decision-making and power styles of stakeholders and the impact on the tribal SOC is in place.
	Tribal, state, and national election dates are known, and the impact on the tribal SOC is considered.
	Tribal SOC models: self-determination; equal partnerships between nontribal and tribal partners; leadership welcomed from all levels of the community; and the tribal community demonstrates that it buys in to the SOC.
	Tribal institutional leadership is stable and supportive of SOC principles.
	Tribal institutions have structures, policies, and procedures that match the cultural norm (tribal institutions are in sync with tribal values).
	Quality improvement process is in place for administrative and program practices and used on a regularly scheduled basis.
	Clinical and fiscal utilization management is in place.
	Quality assurance is managed through a process incorporating families and youth.
	Social marketing plan is in place, utilizing data as a means to impact policy change.
Strategic financing strategies Assessment:	
	Determination of all available (known and untapped) funds and matched dollars assessed.
	Full understanding of the financial strengths and challenges of an SOC developed within a clinic setting, as opposed to a nonclinic setting.
	Ability to redeploy funds is assessed as is the potential impact of redeployment on the community's well-being.
Partnerships:	
	Relationships developed with other child-serving system leaders to start discussion of the benefits of pooled resources to expand the fiscal base and leverage funds.
	Relationship with the state mental health authority in place.
	Relationship with the state Medicaid office in place.
	Relationship among tribal-public-private leadership at state and local levels is established and fosters fiscal investments in children and families.
Readiness:	
	Leadership understands the licensing requirements and state-negotiated service categories needed to seek Medicaid or Title IV-E waivers.
	Programs are operated more efficiently by cutting costs and reinvesting funds.
	Plan for training, licensing, and credentialing of staff in place, per Medicaid reimbursement requirements.
	Process in place for peer-to-peer fund development advice from other tribal SOC communities.
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