

# 2022 -2025 STRATEGIC PLAN

STRONGER with STRATEGY

# CONTENTS

Mission	
Vision	3
Preamble	3
Acknowledgement	4
Approach	5
Methodology	5
Methodology	6
NCUIH Overarching Purpose and Strategic Goal	7
NCUIH Overarching Purpose	7
NCUIH Overarching Strategic Goal	7
NCUIH Overarching Metrics	8
NCUIH Programs & Services (PS)	9
Expert Thought Leadership	9
Advocacy & Outreach	9
Innovative Research	9
Training & Technical Assistance	9
NCUIH Priorities	10
NCUIH Programs and Services (PS) Purpose,	11
Strategic Goal and Objectives	11
Programs and Services Purpose	1
Programs and Services (PS) Strategic Goal Statement	1
Programs and Services (PS) Strategic Objectives	1
NCUIH Organizational Infrastructure & Capacity (OIC)	13
NCUIH Organizational Infrastructure & Capacity (OIC) Purpose, Strategic Goal and Objectives	13
Organizational Infrastructure & Capacity (OIC) Purpose:	13
Organizational Infrastructure & Capacity (OIC) Strategic Goal Statement	13
Organizational Infrastructure and Capacity (OIC) Strategic Objectives	14
Board of Directors	16
Appendix A: Strategic Plan Metric Definitions	17-18



NCUIH is a national 501(c)(3) organization devoted to the support and development of quality, accessible, and culturally competent health services for American Indians and Alaska Natives living in urban settings.

# VISION

NCUIH envisions a nation where comprehensive, culturally competent personal and public health services are available and accessible to American Indians and Alaska Natives living in urban communities throughout the United States.

### Preamble

The National Council of Urban Indian Health (NCUIH) is dedicated to improving the health of American Indians and Alaska Natives living in urban areas. NCUIH provides advocacy, education, technical assistance, training, leadership, and connections to Urban Indian Organizations and others who share our important mission. Since its incorporation, NCUIH's membership has grown to 41 Urban Indian Organizations (UIOs). Tribal Leaders advocated for the creation of UIOs as a way to address the health and cultural crises stemming from the enforcement of the Relocation Era policies.

UIOs were established because of the Relocation Era, to ensure the trust obligation of health care was fulfilled in urban areas. American Indian and Alaska Native people were the original inhabitants in North America. In exchange for the land and oppression experienced by Native people, the United States government made a trust and treaty obligation to provide certain inalienable rights including health care. The right to health care is not restricted to colonizer created lines and as over 70% of the Native population now resides in cities, NCUIH is charged with ensuring the United States government is upholding its legal obligation to Native people.

NCUIH honors our ancestors by advocating for the trust and treaty obligation to be implemented as originally intended; to all AI/ANs, not just those defined by oppressor barriers. NCUIH has assisted UIOs in capacity building, policy and legislation advocacy, and innovative research to create change throughout Indian Country. NCUIH continues to provide a platform for UIOs to unify and uphold, protect, and advance the trust and treaty obligation of healthcare for AI/AN people living in urban areas.

The NCUIH Board of Directors passed its initial formal organization strategic plan in 2006 with input from members, a four-year strategy to introduce a planning process to the organization five-year strategic plan for FY16 to FY20. Since then, NCUIH has diligently established the organization as a: policy and advocacy powerhouse, in demand technical assistance support center, and advanced research and public health advisory team. The organization and its UIO members have endured rare and unforeseen challenges created by the COVID-19 pandemic; thus, NCUIH had to remain amenable and move with the ever-changing environment. To address these evolving needs and opportunities, NCUIH has executed a formal 2022-2025 strategic planning process and report.



**ACKNOWLEDGEMENT** 

The National Council of Urban Indian Health (NCUIH) long-term strategic plan engaged board members, staff, and other key stakeholders to ensure the planning process was comprehensive, inclusive, and aligned with the interests of members. Without the support and guidance of the following this plan would not be possible.



NCUIH BOARD OF DIRECTORS MEMBERS

NCUIH SENIOR LEADERSHIP

**NCUIH STAFF** 

URBAN INDIAN ORGANIZATIONS



# **Approach**

For over 20 years NCUIH, a 501c3 organization, has been dedicated to the support and development of quality, accessible, and culturally-competent health and public health services for American Indians and Alaska Native (AI/AN) people living in urban settings. NCUIH is at the forefront of protecting and advocating for Indian health to ensure the sustainability of Urban Indian Organizations (UIOs) and in turn promote the health and safety of AI/AN people living in urban settings. Because of NCUIH's deep collaborative relationships with UIOs, our team is strategically positioned to advocate for health equity for urban AI/AN communities. NCUIH regularly works with federal agencies, policymakers, and the general public to provide critically needed community information on health disparities and the needs of AI/AN people living in urban areas. NCUIH's critical work accomplishes the following unmet needs:

- > Cultivates and coordinates relationships between UIOs and other healthy, like-minded partners such as major mainstream health research centers and universities.
- > Creates awareness of the plight and strengths of AI/AN in urban communities in mainstream America as well as Congress and federal agencies.
- Develop leadership skills of Native youth to sustain Indian Country for future generations.
- > Establishes connections between the AI/AN in urban areas population and private foundations, corporations, and donors.
- > Brings Urban and Tribal leaders together to establish a continuous flow of communication and collaboration.
- Acts as a bridge between local communities' leadership and federal agencies
- > Provides platforms for experts on the health of AI/AN people living in urban areas to represent and voice local community concerns

# Methodology

To ensure NCUIH's new strategic vision is defined, organized, and executed, a series of facilitated conversations, workshops, and surveys were administered. The survey asked NCUIH staff and board to reflect upon desired outcomes for the strategic plan, evaluate whether the mission/vision reflect the current work and priorities of NCUIH, the greatest strengths, weaknesses, opportunities and threats (SWOT) that NCUIH faces, and staff and board members' individual relative satisfaction with their positions. Thirty-four people completed the survey, including 27/42 staff members and 7/12 board members, not including a three-day NCUIH Strategic Planning retreat with all NCUIH board members. As a supplement to the survey, 15 interviews were conducted with 11 staff in diverse positions within the organization, 3 board members, and one ally, that delved more deeply into similar questions. The surveys and interviews took place in October and November 2021.

The survey and interview results revealed a high degree of consensus that NCUIH's fundamentals are strong. Despite the challenges of rapid growth and an entirely unexpected change of external conditions due to the COVID-19 pandemic, a large majority of respondents felt that NCUIH's current mission and vision accurately reflect its work and priorities, that program priorities are sound and the work of the program areas are effective, and that staff leadership and work culture is constructive and sustaining. Areas of focused improvement for NCUIH is in aligning NCUIH infrastructure with its program growth.



# **Methodology** continued

Given these results, the planning committee decided not to undertake any revision of the mission or vision of NCUIH in this strategic planning cycle. Further, we affirmed that our baseline was that the underlying direction of NCUIH is positive and that this strategic planning cycle would therefore focus on answering crucial strategic questions at this stage of the organization's life cycle rather than radical changes in direction or emphasis.

The intention for the strategic plan is that this will be a living document that will guide our work and decisions for the next three years. To that end, we have included a monitoring and implementation plan at the end of this report. This document outlines the 3-year strategic direction for National Council of Urban Indian Health (NCUIH). An overarching purpose and strategic goal are presented to anchor the 3-year strategic plan and an evaluation process that defines key performance indicators is outlined. The appendix provides the organization history, mission, Statement of Unity, and organization goals that are the foundation of the organization and serve as the guiding principles for the strategic planning process.



I never worked for an organization that makes me feel as proud as NCUIH! Not only does NCUIH have a strong mission and provides concrete results, but it is also full of talented and knowledgeable people with a passion for their work. Working at NCUIH makes me feel heard, productive, and full of hope for the future."

"I love working at NCUIH because I always feel successful and satisfied in the work that I do. Work is a large part of life and here at NCUIH, I love what I do, what I can and have accomplished, and how significant those accomplishments are for the communities that we serve. NCUIH makes it easy to do great work and love the work I do!"

"NCUIH not only supports the needs of American Indian and Alaska Natives, but it also supports the needs of its workers. This organization sticks to its mission and vision as it consciously grows in size and impact. The diverse community and work NCUIH fosters are a testament to its current and future work."



# **NCUIH Overarching Purpose and Strategic Goal**

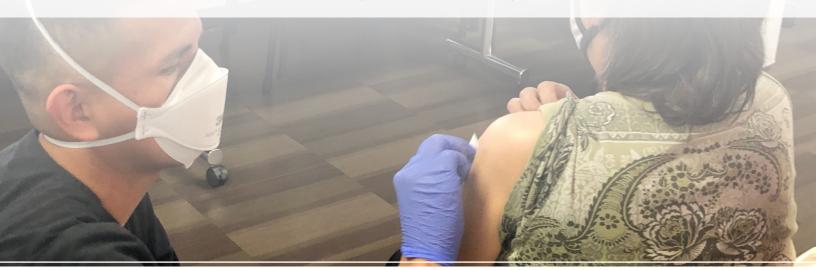
NCUIH is the national organization that represents and advocates for the health treaty and trust obligations of AI/AN people living in urban areas, and we provide critically needed technical assistance, training, policy support, and other services to Urban Indian Organizations located throughout the United States. NCUIH advocates for health equity for AI/AN people living in urban areas. NCUIH envisions a nation where comprehensive personal and public health services are available and accessible to all AI/AN people living in urban centers throughout the United States through the federal government fulfilling the trust and treaty obligations. NCUIH advocates to ensure the trust and treaty obligation of providing healthcare to AI/AN people living in urban settings is not only remembered, but completely realized.

# **NCUIH Overarching Purpose**

NCUIH's overarching purpose is to honor the promises made to our ancestors and fully realize the federal government's trust and treaty obligations of the more than 71% for AI/AN people who live in urban areas. American Indian and Alaska Native people were the original Inhabitants in North America. In exchange for the land and oppression experienced by Native people, the United States government made a trust and treaty obligation to provide certain inalienable rights including health care. The right to health care is not restricted to colonizer created lines and as over 70% of the Native population now resides in cities, NCUIH is charged with ensuring the United States government is upholding its legal obligation to Native people. Guided by the NCUIH Board of Directors and through member feedback, NCUIH establishes yearly legislative priorities, advocates and tracks development and implementation of federal legislation and regulations, and works to protect the interests of urban AI/AN populations and improve access to care. In addition, NCUIH centers on UIO needs, engages urban leaders and community stakeholders in all phases of our work. NCUIH is dedicated to highlighting the work UIOs put in to improving their communities' health to share best practices and connecting each UIO to resources to expand their capacity to address their unique community needs. The organization has been designed to operate under a holistic approach that is both in seamless coordination with NCUIH Board, leadership and staff.

# **NCUIH Overarching Strategic Goal**

NCUIH aims to improve the health status and positive well-being of American Indian and Alaska Native people through a comprehensive network of Urban Indian Organizations that will collectively provide healthcare and public health services, education, training, and current updates on health and wellness to the Indian communities they serve. NCUIH will also promote and work for the trust and treaty rights of Al/AN people living across Indian country.



# **NCUIH Overarching Metrics**

Evaluating the effectiveness of the strategic planning process, assessing its execution, and measuring its impact are critical to NCUIH realizing its goal to assert health equity among the urban AI/AN population. To foster an organizational culture that embraces continuous improvement, a formal process based on a traditional Plan (P), Do (D), Study (S), Act (A) cycle below will be designed and applied to all aspects of the strategic plan. The PDSA cycle is shorthand for testing a change by developing a plan to test the change (Plan), carrying out the test (Do), observing and learning from the consequences (Study), and determining what modifications should be made to the test (Act). Specific metrics and key performance indicators will be defined and a process of measuring impact established.



In evaluating the strategic plan's effectiveness and measure impact on desired goals and objectives two distinct areas are defined – NCUIH programs and services, and NCUIH organizational infrastructure and capacity.

# **NCUIH Programs & Services (PS)**

# **Expert Thought Leadership**

NCUIH's services are grounded on and guided by local community leaders. NCUIH staff are experts in healthcare policy, research, and advocacy and specializes on the specific needs of American Indians and Alaska Natives in urban areas. However, the knowledge learned from UIO leaders and staff is the key to success for all Urban Indian Organizations and makes NCUIH a stronger resource with their voice. NCUIH learns from UIOs their needs at the local level and together creates stronger advocacy and even stronger thought leaders.

#### Advocacy & Outreach

The trust and treaty obligations to provide healthcare to all American Indians and Alaska Natives are required of the United States, despite the lack of adherence to it. Working as a non-partisan organization, NCUIH strives to educate policymakers on how to improve the policies and regulations affecting urban AI/AN healthcare and public health services. NCUIH encourages policy improvements to always incorporate culturally-focused solutions. This approach allows policymakers to learn the local issues in real time while devising policies meant to positively impact and improve our communities.

#### Innovative Research

NCUIH assists policymakers, decision makers and stakeholders by providing research and data relevant to the ongoing impacts on the community level. NCUIH provides evaluation of various data and information such as the review of community needs assessment, thorough data collection, and publication of innovative policy research. The organization also assists in the evaluation of national programs to provide input on how those program models should be implemented across urban AI/AN communities. NCUIH advocates to ensure awareness of UIO data is considered and valued by national partners and allies. Lastly, NCUIH conducts and publishes research pertaining to the health and wellbeing of AI/AN people living in urban areas.

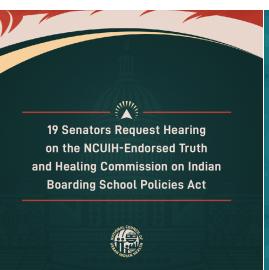
# Training & Technical Assistance

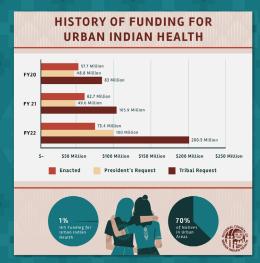
NCUIH's Technical Assistance and Research Center (TARC) is a national resource center that supports Urban Indian Organizations in implementing quality, accessible, and culturally appropriate healthcare services from American Indian and Alaska Native people living in urban areas. TARC supports the development, implementation, and evaluation of health systems and services through Public Health Policy, Management, Finance & Operations, Communications, Education, Evaluation, Research, Outreach, Quality Care and Health Technology. TARC provides technical assistance based on the unique needs of each UIO in order to deliver quality & culturally respectful services to Native people within their community.



# **NCUIH Priorities**

- 1. Honor our ancestors by advocating that the federal government, responsible for the Relocation Era, be accountable for fulfilling the trust responsibility to all American Indians and Alaska Natives regardless of colonizer lines.
- 2. Deliver high quality, culturally competent technical assistance, and research support through:
  - a. Support data practices that promote UIO healthy growth that are accurate, reflect UIO strengths, and respect tribal sovereignty
  - b. Providing Training and Technical assistance to UIOs
- 3. Promote NCUIH uniqueness through engagement and communications with the communities we serve through:
  - a. Expanding public health awareness
  - Supporting health equity initiatives through outreach and partnerships
  - c. Expanding NCUIH services to ensure AI/AN wellbeing
- 4. Expanding access for American Indian and Alaska Native people to healthcare and holistic wellness services through a comprehensive network of Urban Indian Organizations





🌜 🖟 7 out of 10 American Indian or Alaska Native people reside in urban areas. In my view, this is a population that has not received the attention or services that are deserved." Senator Van Hollen

that it's time for the Administration to the IHS to Assistant Secretary," said Walter Murillo (Choctaw), President of NCUIH and Chief Executive Officer of Native Health, which is based in Phoenix, Arizona. "We

"More than 70% of the AI/AN population resides in cities and other urban areas, and NCUIH is the only national organization that advocates for the health of urban AI/AN...Culturally competent healthcare is essential to build healthy communities through addressing the unique culture, language and health literacy needs of patients to improve individual health outcomes." - Francys Crevier, CEO, NCUIH





# NCUIH Programs and Services (PS) Purpose, Strategic Goal and Objectives

# Programs and Services Purpose

The evolution of NCUIH's programs and services has been a reflection of the organization responding to UIO needs and pursuing sustainability. The organization now considers a strategic direction for services growth and investment that centers on program development and partner advancement. With clear purpose and intent, NCUIH's programs can build capacity of UIOs that lead to upholding, protecting, and advancing health equity for AI/AN people living in urban areas.

#### Programs and Services (PS) Strategic Goal Statement

NCUIH will innovate and develop new solutions to expand and enhance programs and services, which improve the quality of life of AI/AN communities living in urban areas and the facilities that serve them.

#### Foundational to NCUIH's mission and purpose is capacity building through the following activities:

- 1) Promote NCUIH uniqueness through engagement and communication in the communities we serve
- 2) Deliver high quality culturally-focused technical assistance and research support
- 3) Enhance NCUIH's reach through new and expanded partnerships
- **4)** Equip all stakeholders with quality information knowledge on the health of AI/AN people in urban areas across the United States through comprehensive and useful information
- **5)** Educate Congress, agencies, and other stakeholders using the most accurate and up-to-date data on the conditions UIOs face

## Programs and Services (PS) Strategic Objectives

Three primary programs and services objectives have been defined to advance NCUIH's three-year strategic agenda. Strategic direction will be developed for each of the following objectives:

- **1. PS Objective 1:** Promoting the highest standard in health that addresses Social Determinants of Health for all AI/AN people living in urban areas.
- **2. PS Objective 2:** Connecting UIOs, policymakers, federal officials, and the general public to clear, concise, and authoritative information on the wellbeing of AI/AN people living in urban areas
- **3. PS Objective 3:** Partnership and Collaboration Act as a convener to support tribal, urban and mainstream partnerships that serve and benefit the wellbeing of AI/AN people in all places

**PS Objective 1:** Promoting the highest standard in health that addresses Social Determinants of Health for all AI/AN people living in urban areas

#### PS ACTIONS

- 1. **PS Action 1.1:** Highlighting UIOs as experts in the Social Determinants of Health that lead the framework for urban AI/AN healthcare
- 2. PS Action 1.2: Deliver high quality culturally-focused technical assistance and research support
- 3. **PS Action 1.3:** Maintain the status as the primary resource center on Indian health providers to serve AI/AN people living in urban areas.
- 4. PS Action 1.4: Promote NCUIH's uniqueness through engagement and communications with the communities we serve

#### PS Objective 1 Metrics – Areas NCUIH should consider in developing its (Objective 1) strategic direction are:

- Number of UIO Highlights
- Number of NCUIH Website Views
- Number of technical assistance hours
- Percentage of attendee satisfaction
- Number of attendees
- > Number of social media posts

**PS Objective 2:** Connecting UIOs, policymakers, federal officials, and the general public to clear, concise, and authoritative information on the wellbeing of AI/AN people living in urban areas

#### PS ACTIONS

- 1. **PS Action 2.1:** Creating, archiving, and disseminating quality information on the health and wellbeing of AI/AN people living in urban areas.
- 2. **PS Action 2.2:** Communicating the conditions of urban AI/AN communities to national partners and the community at large
- 3. PS Action 2.3: Establish community linkage to address shared health priorities for community action
- 4. **PS Action 2.4:** Help UIOs with new federal regulations and laws through high-quality analysis, resources, events, and webinars
- 7. **PS Action 2.5:** Create awareness and recognize outstanding efforts of AI/AN community leaders on a national scale
- 8. **PS Action 2.6:** Educate policymakers about the requirements of the trust and treaty obligation of health care, the Indian Health Care Improvement Act and the on the ground impacts as it relates to urban AI/AN people

#### PS Objective 2 Metrics - Areas NCUIH should consider in developing its (Objective 2) strategic direction are:

- Number of Knowledge Resource Center additions
- Number of NCUIH Resources (e.g Case Studies, Blogposts, Literature Reviews, Fact Sheets)
- Number of webinars
- Number of National presentations at national (conferences, confers, testimonies, etc.) or regional events (UIO conferences, meetings, events, etc.)
- Number of community campaigns
- Ratio: Urban Confer Call for Comments / Comments Submitted
- Number of Prep Calls/Focus Groups Held
- Number of Other Comments Submitted (Tribal Consultation, Regulatory Comments, RFIs, etc.)
- Number of Urban Indian Health Champion Awards
- Number of Congressional meetings
- Number of legislative texts including "Urban Indians"

**PS Objective 3: Partnership and Collaboration** – Act as a convener and support tribal and urban partnerships that serve and benefit the wellbeing of AI/AN people living in all places

#### PS ACTIONS

- 1. **PS Action 3.1:** Identify and develop healthy strategic partnerships and collaborations with organizations that can support the improvement of AI/AN healthcare and equity for AI/AN people living in urban areas.
- 2. **PS Action 3.2:** Partnership building to promote appropriate data practices that support UIOs (growth, impact, disparities, accuracy, etc.)

PS Objective 3 Metrics - Areas NCUIH should consider in developing its (Objective 3) strategic direction are:

- Number of new partnerships
- Number of collaborations
- Number of federal partners (e.g NIH, IHS, CMS, CDC, etc.) NCUIH has shared data practices with



# NCUIH Organizational Infrastructure & Capacity (OIC)

NCUIH has intentionally sought to expand its capacity, through fundraising and proposal development activities, to provide more and better services for both UIOs and urban AI/AN communities across the nation. These efforts led to an increase in the number of federal agencies and private foundations interested in working with NCUIH as well as a broadening of NCUIH's scope of work. The latter became part of the externalities fostering NCUIH's organizational growth. The organization grew from a 7-person organization in 2016 at the start of the last strategic plan, to over a 50-person organization in 2022 which is a 400% growth in approximately 18 months. NCUIH's operations and services have become more specialized and more sophisticated, but also required an equally exponential development of infrastructure to support and appropriately foster an adequate operational flow for NCUIH's technical assistance, research, policy, advocacy and outreach efforts.

NCUIH responded to our new circumstances by creating the Programs and Operations (P&O) Division, which encompasses human resources, finances, developments and strategic growth, as well as communications. The P&O division in the last year and a half has been devoted to create the necessary infrastructure for NCUIH to operate and function correctly and respond to diverse demands under the current uncertain pandemic environment. NCUIH will further develop our operational infrastructure to ensure sustainability, strengthening our current infrastructure, and promote cross department collaboration to ensure that the organizational structural development incorporates their current and future needs in terms of human resources, financial operations, communications and strategic expansion.

# NCUIH Organizational Infrastructure & Capacity (OIC) Purpose, Strategic Goal and Objectives

# Organizational Infrastructure & Capacity (OIC) Purpose

NCUIH organizational infrastructure and capacity consider three categories for which metrics will be defined and a process of evaluation determined for: organizational systems, financial health, and employer of choice. For each of the categories, the evaluation of impact will be based on measurement in a series of sub-categories outlined below.

# Organizational Infrastructure & Capacity (OIC) Strategic Goal Statement:

NCUIH intends to further expand its operational and programmatic capacity and structural platforms to achieve a sustainable and self-innovative Native organization serving UIOs and AI/AN people residing in urban areas across the nation.

#### Foundational to NCUIH's mission and purpose is capacity building through the following activities:

- 1) Serve as a healthy Indian Country leader devoted to the health outcomes improvement of AI/AN people through partnerships and development of NCUIH staff
- 2) Sustainability of the Indian health sector via grants and billing administration
- 3) Foster leadership opportunities and professional development across NCUIH
- 4) Access to quantitative and qualitative data to support infrastructural expansion
- 5) Have a cadre of knowledgeable professionals in urban AI/AN healthcare topics
- 6) Fostering educational initiatives that support skills expansion and staff development
- 7) Increase in general operating or unrestricted funding for NCUIH to have the ability to invest in the priorities of improving urban AI/AN health.
- 8) Expand our knowledgeable audience and enlarge networks of invested stakeholders as resources for UIOs to grow

#### Organizational Infrastructure and Capacity (OIC) Strategic Objectives

Organizational health and viability are essential for NCUIH to practice its mission and achieve significant impact towards its goals of healthcare equity for urban AI/AN communities. To maintain ongoing organizational development NCUIH must dedicate strategic resources to administrative functions that support its program and policy agendas. Strategic direction will be developed for each of the following objectives:

- 1. OIC Objective 1: Foster staff development and leadership at all levels
- 2. OIC Objective 2: Target flexible and unrestricted funding streams to raise current revenue dollars 10% in 3 years.
- 3. OIC Objective 3: Continue to make NCUIH the employer of choice

#### **OIC Objective 1:** Foster staff development and leadership at all levels.

#### OIC ACTIONS

- 1. **OIC Action 1.1:** Support the Indian health sector by communicating careers in the Indian health and policy sectors to ensure our sector has the best and brightest in the field
- 2. **OIC Action 1.2:** Develop NCUIH leadership and staff to continue to develop excellent well-rounded, culturally relevant subject matter experts
- 3. OIC Action 1.3: Recognize outstanding efforts of Urban community leaders on a national scale
- 4. **OIC Action 1.4:** Fully implement internal platforms that will maximize efficiency and improve performance. Continue to stay cutting edge on technology resources and tools to provide a seamless work environment
- 5. OIC Action 1.5: Develop a process improvement program to continuously improve processes and procedures at NCUIH

#### OIC Objective 1 Metrics - Areas NCUIH should consider in developing its (Objective 1) strategic direction are:

- Number of Indian Country jobs posted through NCUIH channels
- Number of new NCUIH positions
- Number of cultural sensitivity trainings
- Number of National Community Leader awards and nominations
- And through Qualitative Projects

# **OIC Objective 2:** Target flexible and unrestricted funding streams to raise current revenue dollars 10% in 3 years. OIC ACTIONS

- 1. **OIC Action 2.1**: Cultivate relationships with foundations, corporations, and steward donors that have a strong commitment to health equity of AI/AN communities
- 2. OIC Action 2.2: Develop an Individual giving program to amplify the support of AI/AN priorities
- 3. OIC Action 2.3: Fully implement new platforms, train staff to use budgets and strategically allocate funding.
- 4. OIC Action 2.4: Decentralized infrastructure to improve oversight and transparency

#### OIC Objective 2 Metrics - Areas NCUIH should consider in developing its (Objective 2) strategic direction are:

- Number of new foundation partnerships, corporation partnerships, and steward donor partnerships
- Number of fully implemented platforms, number of trainings, and number of training attendees
- > Annual financial audit
- Number of Operational Tools Developed for Directors and/or Managers

**OIC Objective 3:** Grow NCUIH team to a strong recruitment and retention position while increasing visibility of NCUIH

#### OIC ACTIONS

- 1. **OIC Action 3.1:** Improve communications to recruit people with knowledge to achieve goals and skillsets to communicate/work in DC
- 2. OIC Action 3.2: Expand HR network through collaboration with UIOs
- 3. **OIC Action 3.3:** Focus on staff professional development, continuing education, and certifications to further growth as a team or as an organization.

**OIC Objective 3 Metrics** - Areas NCUIH should consider in developing its (Objective 3) strategic direction are:

- ▶ Number of Opened NCUIH Career Opportunities Newsletter
- Number of New Hires and Open Positions
- Number of professional development training(s) attended
- Number of CEs and certifications completed
- Number of professional development certifications completed

#### **Primary Care**

- General medical care
- Diabetes care and prevention
- Health and wellness check-ups
- Vision and hearing screenings
- Immunizations
- Chronic disease care
- Women's health
- Urgent care

#### **Traditional Medicine**

- Sweat lodge ceremonies
- Men's, women's, and elder's talking circles
- Traditional medicine from traditional healers
- Prayer ceremonies
- Relationship gatherings



#### **Behavioral Health Services**

- Mental health counseling
- Psychiatry
- Substance abuse counseling
- Education and prevention services
- Anger management
- Domestic violence counseling

#### **Social & Community Services**

- Prevention and education services
- Youth camps and programs
- · Elder services
- Domestic violence services and classes
- Job placement
- Diet and nutrition services and classes
- Arts and crafts
- Pot luck/soup kitchens

# **BOARD OF DIRECTORS**



REGION 4 Todd Wilson **Board Member** (Crow) Executive Director Helena Indian Alliance-Leo Pocha Clinic



REGION 3 Michaela Seiber Board Member (Sisseton-Wahpeton Oyate) South Dakota Urban Indian



REGION 6C Natalie Aguilera **Board Member** Native American Health Center



RoxAnne M Lavallie-Unabia Board Member (Turtle Mountain Band of Chippewa) Executive Director American Indian Health Service of Chicago



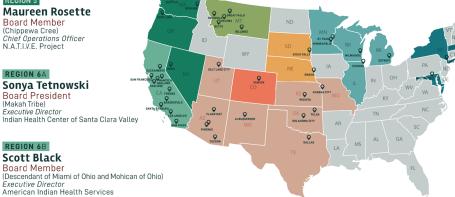
**REGION 5 Maureen Rosette Board Member** (Chippewa Cree)
Chief Operations Officer
N.A.T.I.V.E. Project

REGION 6B

Scott Black



REGION 6A Sonya Tetnowski **Board President** (Makah Tribe) Executive Director Indian Health Center of Santa Clara Valley



**UIOS** by **NCUIH Regions Q** UIO Locations



REGION 1 Kerry Lessard Board Member (Descendant of Absentee Shawnee) Executive Director
Native American Lifelines of Baltimore



REGION 7C Robyn Sunday-Allen **Board Vice-President** (Cherokee)
Chief Executive Officer
Oklahoma City Indian Clinic



REGION 7A Linda Son-Stone **Board Secretary** Executive Director First Nations Community HealthSource



REGION 8 Adrianne Maddux Board Treasurer (Hopi) Executive Director Denver Indian Health and Family Services



REGION 7B **Walter Murillo** Board President-Elect (Choctaw) Chief Executive Officer Native Health Center



**UIOs** by **NCUIH Regions** 

**Q** UIO Locations

REGION 1

New York Indian Council, Inc. Darrell Waldron Executive Director 21–25 44th Avenue, Suite 102 Long Island City, NY 11101 Phone: 718-215-8417

Native American LifeLines of Baltimo

Kerry Lessard Executive Director 1 E. Franklin Street, Suite 200 Baltimore, MD 21201 Phone: 410-837-2258

Native American LifeLines of Boston

Native American LifeLin Kerry Lessard Executive Director Janelle Pocowatchit Program Manager 2077 Centre Street West Roxbury, MA 02132 Phone: 857-203-9680

REGION 2

American Indian Council on Alcoholism, Inc. Renee Lafleur Chief Operations Officer 6510 W. Layton Avenue, Suite 101 Milwaukee, WI 54128 Phone: 414-930-9210

American Indian Health & Family Services Chasity Dial Chief Executive Officer 4880 Lawndale St. Detroit, MI 48210 Phone: 313-846-3718

American Indian Health Service of Chicago Roxanne Lavallle-Unabla Interim Executive Director 4326 West Montrose Avenue Chicago, IL. 60641 Phone: 773–883–9100

Gerald L. Ignace Indian Health Center Lyle A. Ignace M.D., M.P.H Executive Director 930 W. Historic Mitchell St Milwaukee, WI 53204 Phone: 414-383-9526

Indian Health Board of Minneapolis Patrick M. Rock, M.D. Chief Executive Officer 1315 East 24th Street Minneapolis, MN 55414 Phone: 612-721-9800

Juel Fairbanks Chemical Dependency Services

REGION 3

Nebraska Urban Indian Health Coalition, Inc.

Dr. Donna Polk Chief Executive Officer 2226 N Street Omaha, NE 68102 Phone: 402-346-0902

South Dakota Urban ndian Health, Inc.

Michaela Seiber Executive Director 1200 N West Ave Sioux Falls, SD 57104 Phone: 605-339-0420

REGION 4

Helena Indian Alliance-Leo Pocha Clinic

Todd J. Wilson Executive Director 501 Euclid Ave. Helena. MT 59601 Phone: 406-442-9244 Indian Family Health Clinic (IFHC)

Native American Development Corporation Leonard Smith Executive Director 17 N. 26th St. Billings, MT 59101 Phone: 406-259-3804

All Nations Health Center Skye NcGinty Executive Director 830 West Central Missoula, MT 59801 Phone 406-829-9515 Butte Native Wellness Center Shannon Parker

Executive Director 55 East Galena Butte, MT 59701 Phone 406-782-0461

Billings Urban Indian Health & Wellness Jenter Leonard Smith Executive Director 1230 N 30th Street Billings, MT 59101 Phone 406-534-4558

REGION 5

Native American Rehabilitation Association of the Northwest, Inc. (NARA) Jackie Mercer Executive Director 1776 SW Madison Portland, 0.8 97205 Phone 505-224-1044

The NATIVE Project Toni Lodge Chief Executive Officer 1803 W Maxwell Ave Spokane, WA 99201 Phone 509-325-5502

Nevada Urban Indians, Inc. Janet Reeves Chief Executive Officer 6512 S. McCarran, Suite A Reno, NV 89502 Phone 775-788-7600

Seattle Indian Health Board Esther Luceo Chief Executive Officer 611 12th Avenue South Seattle, WA 98144 Phone 206-324-9360

REGION 6

American Indian Health & Services, Inc. Scott Black Executive Director 4141 State Street Santa Barbara, CA 93110 Phone: 805-681-7144

Bakersfield American Indian Health Project (BAIHP)

Angel Galvez Chief Executive Officer 501 40th Street Bakersfield, CA 93301 Phone: 661-327-4030

Fresno American Indian Health Project (FAIHP) Selina de la Pena Executive Director 1551 E. Shaw Ave. Suite 139 Fresno, CA 93710 Phone: 559-320-0490

Friendship House - Association of American Indians, Inc. of San Francisco

Gabriel Pimentel Executive Director 56 Julian Avenue San Francisco, CA 941)3 Phone: 415-865-0964 Indian Health Center of Santa Clara Valley

Native American Health Center Martin Waukazoo Chief Executive Officer 2950 International Blvd. Oakland, CA 94601 Phone: 510-434-5300

Sacramento Native American Health Center, Inc. (SNAH2) Britta Guerrero Chief Executive Officer 2020 J Street Sacramento, CA 95811 Phone: 916-341-0575

San Diego American Indian Health Center Kevin LaChapelle Chief Executive Officer 2630 First Ave. San Diego. CA 92103 Phone: 619-234-2158

Native Directions, Inc./Three Rivers Indian Lodge Ramona Valadez Executive Director 13505 Union Road Manteca, CA 95336 Phone: 209-858-2421

United American Indian Involvement, Inc. Luis Cervantes Chief Executive Officer 1453 West Temple Street Los Angeles, CA 90026 Phone: 213-202-3970

REGION 7

First Nations Community Healthsource Linda Son-Stone Executive Director 5608 Zuni Road SE Albuquerque, NM 87108 Phone: 505-262-2481

Hunter Health Amy Feimer Executive Director 935 N Market St Wichita, KS 67214 Phone: 316-262-2415

Indian Health Care Resource Center of Tulsa Carmelita Skeater Chief Executive Officer 530 South Peorla Avenue Tulsa, 0/K 74/20 Phone: 918-588-1900

Kansas City Indian Center

Executive Director 600 W 39th Street Kansas City, MO 64111 Phone: 816-421-7608

Native Americans for Community Action (NACA) (NACA)
Dorothy Denetsosie-Gishie
Chief Executive Officer
1500 E Cedar Ave., Suite 56
Flagstaff, AZ 86004
Phone: 928-526-2968

Native Health Walter Murillo Chief Executive Officer 4041 North Central Ave. Building C Phoenix, AZ 85012 Phone: 602-279-5262

Native American Connections Diana Yazzie-Devine Chief Executive Officer 4520 North Central Avenue, Suite 600 Phoenix, AZ 85012 Phone: 602-254-3247

Oklahoma City Indian Clinic Robyn Sundav-Allo-Robyn Sunday-Allen Executive Director 4913 West Reno Avenue Oklahoma, OK 73127 Phone: 405-948-4900

Tucson Indian Center Jacob Bernal Jacob Bernal Executive Director 160 North Stone Ave. Tucson, AZ 85701 Phone: 520-884-7131

Urban Indian Center of Salt Lake City Kristina Grover, Co-Executive Director Kristina Grover, Co-Executive Direct Phone: 801-214-7672 Ryan Ward, Co-Executive Director Phone: 801-214-7660 120 W 1300 S Salt Lake City, UT 84115 Phone: 801-486-4877

Urban Inter-Tribal Center of Texas

Omer Tamir Executive Director 1283 Record Crossing Road Dallas, TX 75235 Phone: 214-941-1050

REGION 8

Denver Indian Health and Family Services Adrianne Maddux Executive Director 2880 W. Holden Place Denver, CO 80204 Phone: 303-953-6618

# **Appendix A:** Strategic Plan Metric Definitions

# **NCUIH Strategic Plan Operational Definitions**

METRIC	OPERATIONAL DEFINITION
Annual Financial Audit	Examination of the financial records of an entity by a certified third party examiner. This examination by a knowledgeable outsider is needed to provide credibility to an organization's financial statements.
Attendee	A person who attends a conference or other gathering
Attendee Satisfaction	A self-reported measurement of the reaction to being present at a NCUIH event ranging from very satisfied to very unsatisfied by post-event survey respondents.
Case Studies	An intensive analysis of an individual unit (such as a person or community) stressing developmental factors in relation to environment
Collaborations	The action of working with someone to produce or create something in the benefit of the Urban Indian communities and Clinics, it may involve one or more interactions
Comments	Written responses submitted by NCUIH to Federal agencies and workgroups.
Community Campaign	Outreach events and communication pieces dissemination on Public Health, Native- specific, and Native rights stemming from or impacting AI/AN communities in urban settings
Congressional Meetings	Meetings held between NCUIH Congressional Relations staff and staffers within Member of Congress' offices.
Continuing Education Units	A CEU is a unit of credit equal to 10 hours of participation in an accredited program designed for professionals with certificates or licenses to practice various professions.
Corporation Partnerships	A partnership includes a formal written agreement in which a corporation or a corporate giving agency provides funding to support NCUIH's mission. This may also include relationships without a formal written agreement in which the corporation provides time and/or in-kind support to NCUIH's mission.
Cultural Sensitivity Training	Educational pieces that create and increase awareness of the nuances of cross- cultural interactions, and the role of words, actions, gestures and body language in cultivating relationships with different people and groups
Data Practices	Data practices are a coherent system of activities (including data collection, analysis, and interpretation) which are designed to provide UIOs with actionable, meaningful data on high-priority topics.
Focus Group	A demographically diverse group of people assembled to participate in a guided discussion about a particular product before it is launched, or to provide ongoing feedback on a political campaign, television series, etc.
Foundation Partnerships	A partnership includes a formal written agreement in which a foundation provides funding to support NCUIH's mission. This may also include relationships without a formal written agreement in which the foundation provides time and/or in-kind support to NCUIH's mission.
Indian Country Job	A employment opportunity for professionals whose skills, cultural knowledge and competency are needed to improve the socio-economic, wellbeing and health of AI/AN communities living in urban settings
Knowledge Resource Center Additions	Addition of resource content (i.e. journal articles, testimonies, comments, fact sheets) to the KRC online database

METRIC	OPERATIONAL DEFINITION
Legislative Texts	Addition of resource content (i.e. journal articles, testimonies, comments, fact sheets) to the KRC online database
National Community Leader Awards	A recognition piece granted to an Individual whose leadership positively impacted the Urban Indian community or nationally
National Presentation	A communication event throughout a whole country that relays a topic to an audience in the form of a slide show, a demonstration, a lecture or speech where words and pictures intend to complement each other
Operational Tools	Virtual instruments utilized to optimize processes and improve procedures both within and among NCUIH's divisions
Peer-to-Peer Session	An event allows individual or organizations to work through new concepts and material with other peers who are working on the same project, as well as opportunities to teach and be taught by one another, broadening their perspectives and fostering meaningful connections.
Platform Training	An educational event to increase staff in their capacity and ability to utilize digital (and offline) means, forums and tools to create, increase or optimize workflows, interactions or collaborations
Platforms	Digital (and offline) means, forums and tools to create, increase or optimize workflows, interactions or collaborations
Prep Call	An informal meeting held by NCUIH in advance of any major meeting with UIOs and a federal agency/entity within the Administration.
Professional Development Certification	Professional development certificate programs offer a cluster of courses that provide knowledge and training in a specific competency.
Professional Development Training	Continuing education and career training after a person has entered the workforce in order to help them develop new skills, stay up-to-date on current trends, and advance their career
Published Product	A product (graphic, table, document, report, etc.) developed by NCUIH staff that is viewable to the public, either on our NCUIH website or in a peer-reviewed journal
Regional Presentation	A communication event in a specific town or areas that relays a topic to an audience in the form of a slide show, a demonstration, a lecture or speech where words and pictures intend to complement each other
Steward Donor Partnerships	A person or group of people that give something (such as money) to support NCUIH's mission.
Technical Assistance Hours	Broadly defined as support to help organizations acquire any specialized service or skill that is not currently resident within the organization, but which it may need in order to operate more effectively or strengthen sustainability
UIO Highlights	Highlight of successes or achievements by UIOs that are on the NCUIH website or newsletter
Urban Confer	A formal meeting between a federal agency and UIOs. Currently, only IHS has a formal Urban Confer policy.
Urban Indian Health Champion Awards	A recognition piece granted to an Individual that achieved an exceptional action that advances the needs and interests of the Urban Indian sector
Webinar	A seminar conducted over the internet



# 2022 -2025 STRATEGIC PLAN







