Mission

To raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level.

Vision

Healthy communities and quality health care systems through strong partnerships and culturally responsive practices.

Goal 1: To ensure that comprehensive, culturally appropriate personal and public health services are available and accessible to American Indian and Alaska Native people.

Objective 1.1: Recruit, develop, and retain a dedicated, competent, and caring workforce.

Strategies

1. Improve and innovate a process that increases recruitment and retention of talented, motivated, culturally knowledgeable, and competent workers, including through partnerships with AI/AN communities and others.
2. Continue and expand the utilization of the IHS and Health Resources and Services Administration’s National Health Service Corps scholarship and loan repayment programs, as authorized by law, to increase health care providers at I/T/U facilities.
3. Support IHS sponsorship of fellowship slots in certain specialized leadership programs for recruitment of future clinical and administrative leaders.
4. Evaluate new organizational structure options and reporting relationships to improve oversight of the Indian Health Professions program.
5. Expand the use of paraprofessionals, Advanced Practice Nurses, and Physician Assistants to increase the workforce and provide needed services.
6. Develop training programs in partnership with health professional schools and training hospitals and expand opportunities to educate and mentor AI/AN youth interested in obtaining health science degrees.
7. Enhance and streamline IHS Human Resources infrastructure to hire well-qualified personnel.
8. Strengthen the workforce to improve access to, and quality of, services.
9. Improve leadership skills, adopt a consistent leadership model, and develop mentoring programs.
10. Improve continuity processes and knowledge sharing of critical employee, administrative, and operational functions through written communications and documentation within the IHS.

11. Improve workplace organizational climate with staff development addressing teamwork, communication, and equity.

12. Strengthen employee performance and responsiveness to IHS, Tribes, urban Indian Organizations (UIOs), and patients by improving employee orientation and opportunities for training, Graduate Medical Education programs, and other educational offerings, including customer service skills and cultural competency.

**Objective 1.2: Build, strengthen, and sustain collaborative relationships.**

**Strategies**

1. Collaborate with Tribes and UIOs in the development of community-based health programs, including health promotion and disease prevention programs and interventions that will increase access to quality health programs.
2. Develop a community feedback system/program where community members can provide suggestions regarding services required and received.
3. Support cross-collaboration and partnerships among I/T/UI stakeholders.
4. Promote collaborations among the IHS, federal agencies, Tribes, Tribal organizations, UIOs, and states to expand services, streamline functions and funding, and advance health care goals and initiatives.
5. Work with community partners to develop new programs responsive to local needs.

**Objective 1.3: Increase access to quality health care services.**

**Strategies**

1. Develop and support a system to increase access to preventive care services and quality health care in Indian Country.
2. Develop and expand programs in locations where AI/AN people have no access to quality health care services.
3. Overcome or mitigate challenges and enhance partnerships across programs and agencies by identifying, prioritizing, and reducing access limitations to health care for local AI/AN stakeholders.
4. Increase access to quality community, direct, specialty, long-term care and support services, and referred health care services and identify barriers to care for AI/AN communities.
5. Leverage technologies such as telemedicine and asynchronous electronic consultation systems to include a more diverse array of specialties and to expand, standardize, and increase access to health care through telemedicine.
6. Improve team effectiveness in the care setting to optimize patient flow and efficiency of care delivery.
7. Reduce health disparities in the AI/AN population.
8. Provide evidence-based specialty and preventive care that reduces the incidence of the leading causes of death for the AI/AN population.
9. Incorporate traditional cultural practices in existing health and wellness programs.
10. Improve the ability to account for complexity of care for each patient to gauge provider productivity more accurately.
11. Hold staff and management accountable to outcomes and customer service through satisfaction surveys.
12. In consultation with Tribes, modernize health care facilities and staff quarters to expand access to quality health care services.
13. In consultation with Tribes, review and incorporate a resource allocation structure to ensure equity among Tribes.
14. Develop and coordinate environmental engineering, environmental health, and health facilities engineering services to provide effective and efficient public health services and enable response, recovery, and mitigation to disasters and public health emergencies.

Goal 2: To promote excellence and quality through innovation of the Indian health system into an optimally performing organization.

Objective 2.1: Create quality improvement capability at all levels of the organization.

Strategies

1. Improve the transparency and the quality of data collected regarding health care services and program outcomes.
2. Develop and integrate quality standards and metrics into governance, management, and operations.
3. Standardize quality metrics across the IHS and use results to identify emerging needs, share information on best practices and performance trends.
4. Provide training, coaching, and mentoring to ensure quality improvement and accountability of staff at all levels of the organization.
5. Evaluate training efforts and staff implementation of improvements, as appropriate.
6. Develop and provide standards of care to improve quality and efficiency of health services across the IHS.
7. Adopt the Model for Improvement in all clinical, public health, and administrative activities across the IHS.
8. Adopt patient-centered models of care, including patient-centered medical home recognition and care integration.

Objective 2.2: Provide care to better meet the health care needs of American Indian and Alaska Native communities.

Strategies
1. Strengthen culturally competent organizational efforts and reinforce implementation of culturally appropriate and effective care models and programs.
2. Promote and evaluate excellence and quality of care through innovative, culturally appropriate programs.
3. Promote total health integration within a continuum of care that integrates acute, primary, behavioral, and preventive health care.
4. Explore environmental and social determinants of health and trauma-informed care in health care delivery.
5. Continue to develop and implement trauma-informed care models and programs.
6. Work collaboratively within the IHS, and among federal, state, Tribal, and urban Indian programs to improve health care by sharing best practices.

**Goal 3:** To strengthen IHS program management and operations.

**Objective 3.1:** Improve communication within the organization with Tribes, Urban Indian Organizations, and other stakeholders, and with the general public.

**Strategies**

1. Improve communication and transparency among all employees, managers, and senior leadership.
2. Develop and define proactive communication plans for internal and external stakeholders.
3. Enhance health-related outreach and education activities to patients and families.
4. Design social media platforms that will ensure wide dissemination of information to interested and affected individuals and organizations.
5. Assure quality reporting relationships between service units, area offices, and headquarters are clearly defined and implemented.
6. Effectively collaborate with other IHS offices (e.g., the IHS Loan Repayment Program) and HHS Staff and operating divisions where missions, goals, and authorities overlap.

**Objective 3.2:** Secure and effectively manage the assets and resources.

**Strategies**

1. Enhance transparency of IHS management and accountability infrastructure to properly manage and secure assets.
2. Promote collaboration among federal, state, Tribes, and local health programs to develop the necessary health care and public health infrastructure to effectively provide essential public health services.
3. Provide technical assistance to strengthen the capacity of service units and area offices to enhance effective management and oversight.
4. Apply economic principles and methods to assure ongoing security and sustainability of federal, Tribal and urban Indian facilities.
5. Routinely review management operations to effectively improve key business management practices.
6. Optimize business functions to ensure that the IHS is engaged in discussions on value-based purchasing.
7. Develop policies, use tools, and apply models that ensure efficient use of assets and resources.
8. Strengthen management and operations through effective oversight.
9. Develop standardized management strategies for grants, contracts, and other funding opportunities to promote innovation and excellence in operations and outcomes.
10. Strengthen patient awareness of their health care options, including Medicaid and Medicare enrollment, which may increase access to health care and optimize third-party reimbursements.

**Objective 3.3: Modernize information technology and information systems to support data driven decisions.**

**Strategies**

1. Evaluate electronic health record needs of the IHS and the ability for the health information systems to meet those needs, create seamless data linkages, and meet data access needs for I/T/U health information systems.
2. Develop a consistent, robust, stable, secure, state-of-the-art HIT system to support clinician workflow, improve data collection, increase transparency, and provide regular and ongoing data analysis.
3. Modernize the HIT system for IHS Resource and Patient Management System or commercial off-the-shelf packages.
4. Align with universal patient record systems to link off-reservation care systems that serve American Indians and Alaska Natives.
5. Enhance and expand technology such as the IHS telecommunications to provide access for consultative care, stabilization of care, decreased transportation, and timeliness of care at any IHS-funded health program.
6. Provide available data to inform I/T/U decision-making.
7. Act upon performance data and standardize data and reporting requirements.
8. Assure system of data sharing to solidify partnerships with Tribal and urban Epidemiology Centers and other Tribal programs and UIOs.
9. Establish capability for data federation so that data analytics/business intelligence may be applied to disparate data stored in a single, general-purpose database that can hold many types of data and distribute that data to users anywhere on the network.