**I. Purpose**

The purpose of this Network Self-Assessment Tool for HRSA Rural Health Network Development Planning Grantees is to support you as rural health network leaders in examining and building your organizational leadership capacities in terms of:

* Development of a highly functioning ***network board,***
* Effective ***communication*** with internal and external constituents,
* ***Change leadership*** to support momentum in your network, and,
* Leveraging ***innovation and creativity*** to design products and business lines to meet the needs of your unique communities.

You will have an opportunity to participate in on-going training in each of these areas through the Network Planning Grantee Leadership Series, and you will have access to support for specific questions from Rural Health Innovations (RHI), your Network TA Team. This Network Self-Assessment Tool will provide you and your stakeholders with information on areas of strengths and challenges within your network project and organization. You will also be able to share this information as promising practices during training calls and at national meetings as we work together to create bench strength for rural health networks.

This Network Self-Assessment Tool is designed in concert with the Network Leadership Webinar Series, including board development, effective communication, change leadership, and leveraging innovation. You are encouraged to work on your Network Self-Assessment Tool during the webinar, interacting with your peers and with the webinar host Mary Kay Chess, an experienced network leader and leadership educator. Reach out to your Network TA Team with any questions. Your Network Planning Grant “self-assessment” deliverable is due 90 days past the ending of your grant period. You can use this completed Network Self-Assessment to fulfill this grant deliverable requirement. Please also send a copy of your completed Network Self-Assessment to your Network TA Team member.

**II. Self-Assessment Tool**

***A. General Overview***

Network Name:

Grant Project Name (if different than network name):

State:

**List your long-term HRSA grant goals (i.e., the long-term outcomes of your grant project) and your Network strategic goals (the strategies or short- to mid-term outcome of your grant project):**

|  |  |
| --- | --- |
| **Your Long-Term Grant Goals for Network Planning Grant** | **Your Short- to Mid-Term Network Strategic Goals** |
| 1. |  |
| 2. |  |
| 3. |  |

***B. What Should We Look Like? Network Board Development***

1. **The Network’s membership structure is:**

|  |  |  |
| --- | --- | --- |
| ☐ CAHs ☐ Small Hospitals ☐ Medium Hospitals ☐ Large Hospitals ☐ Rural Health Clinics | ☐ Behavioral Health Providers ☐ Schools/School Districts ☐ Public Health Departments ☐ Free Clinics ☐ Physician-Owned Clinics | ☐ Community Health Centers ☐ Community-Based Organizations ☐ Other: |

1. **Why does this structure make sense for your Network?**
2. **Is there any reason to consider different organizations or members?**

1. **Who specifically would you add?**
2. **The Board Agreement to Serve (Board Member Job Description) has been created and published.**

☐ Yes

☐ No

☐ Will not use an Agreement

☐ Will be developed at a later date

1. **The potential Board Members have been contacted about the opportunity to serve on the Network Board, and they have received a copy of the Board Agreement to Serve (Job Description).**  
   ☐ Yes, we’re all set

☐ In communication with potential Board Members

☐ Just starting to contact potential Board Members

☐ No

1. **There are Board by-laws, and the roles and responsibilities of the Network Board members are clearly identified.**  
   ☐ Completely

☐ Mostly

☐ Generally

☐ Roughly

☐ Barely

**What remains unclear in terms of Network Board member responsibilities/roles?**

1. **Value Proposition:** **How will the Network provide value to the Board members (member organizations), and what roles will the members play in and contribute to the Network?**

|  |  |  |
| --- | --- | --- |
| **Network Member Entity/Name** | **Value & Benefit the Network Provides this Member** | **Role this Member Contributes in the Network** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| 4. |  |  |

***C. Creating Momentum in the Network: Effective and Engaged Communication***

1. **The vison of the Network is:**   
   ☐ Completely clear

☐ Defined

☐ Getting there

☐ An outline

☐ Uncertain

**a. A year from now, what network accomplishment is the membership most confident about?**

**b. A year from now, what network goal or intention appears the most at risk and may not be accomplished?**

1. **The primary function of the Network is clearly defined (products, services, or value proposition).**  
   ☐ Fully

☐ Mostly

☐ Generally

☐ Somewhat

☐ Barely

**a. Describe the primary function and/or purpose of the Network in a short pitch (3-4 sentences):**

1. **The mission of the Network is defined.**  
   ☐ Fully

☐ Mostly

☐ Generally

☐ Somewhat

☐ Barely

1. **Briefly describe the Network mission:**
2. **What communities are served by the Network? Briefly describe the community support for the Network.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Community Name** | **Benefit to be provided by the Network to the Community** | **Community Support to be provided to the Network** | **Rate (1-5) the probable success of the proposed community support (1 = little, 5 = significant)** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |

1. **The Network understands and has identified the primary market or demand for the products and/or services within the identified communities.**  
   ☐ Fully

☐ Mostly

☐ Generally

☐ Somewhat

☐ Barely

|  |  |  |  |
| --- | --- | --- | --- |
| **Who is in the Market?** | **What might they purchase?** | **When will they be contacted?** | **Rate (1-5) their potential level of engagement (1 = little, 5 = significant)** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |

1. **The Network is aware of what communication and marketing channels will be utilized to move the products/services to the identified communities.**   
   ☐ Fully

☐ Mostly

☐ Generally

☐ Somewhat

☐ Barely

1. **What methods will you utilize? Are these tested and evaluated methods? How do you know they will work?**
2. **The Network has developed clear processes for retaining Board Members and limiting turnover.**   
   ☐ Completely True

☐ Mostly True

☐ Somewhat True

☐ Not at all

**What are the Key Elements of the Board Retention Plan?**

|  |  |  |
| --- | --- | --- |
| **Elements of the Board Retention Plan** | **Key Date for Action & Responsible Party** | **Anticipated Outcome** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| 4. |  |  |

1. **The Board has identified the first-year goals.**   
   ☐ Fully

☐ Mostly

☐ Generally

☐ Somewhat

☐ Barely

1. **The Network Board has approved the first-year financial projections, including revenue amounts needed to survive, break even, or thrive.**

☐ Survive

☐ Break even

☐ Thrive

☐ Have not gotten that far

1. **Does the Network Board have a contingency plan if the goals or the financial targets are not met?**  
   ☐ Yes

☐ No

☐ Under construction

* 1. **What are the key details of this plan, including dates for assessment and action?**

1. **The Network Board has a strong conflict resolution process as part of the Board Retention Plan.**

☐ Completely True

☐ Mostly True

☐ Somewhat True

☐ Not at all

***D. Leadership through Effective Change***

1. **The Network leadership and Board are constantly identifying resources to discuss promising practices for building and sustaining viable rural health care networks.**  
   ☐ Yes

☐ No

☐ Maybe

1. **The Network is building relationships with other Networks to benchmark and gather promising practices.**  
   ☐ Completely

☐ In large part

☐ Somewhat

☐ Minimally

☐ Not at all

|  |  |  |  |
| --- | --- | --- | --- |
| **Benchmarking Opportunities List** | **Other Networks: Name and Date to Contact** | **National Meetings: Name and Meeting Dates** | **Informational Calls/TA: Name and Dates of Calls** |
| *SAMPLE*  *Retention of trained providers within the state* | *Network ABC Director, Feb 2016* | *National Coop of Rural Health Networks* | *RHI TA, Retention webinar, Mar 2016* |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |

1. **Regarding sustaining a viable rural health network, the Network members are feeling:**   
   ☐ Completely Confident

☐ Pretty Good

☐ Okay

☐ Could be better

☐ Nervous/Uncertain

1. **What challenges does the Network face and what advantages does the Network have related to sustaining their efforts?**

|  |  |  |  |
| --- | --- | --- | --- |
| **Network Start-up Demands** (e.g., collaboration, marketing, governance, etc.) | **Challenges** | **Advantages** | **Key Stakeholder(s)** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |

1. **On what issues or goals does your Network seem to have significant understanding?**

|  |  |  |
| --- | --- | --- |
| **Topics with aligned understanding** | **Membership Consensus? (Yes/No)** | **What additional research would be beneficial?** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| **Topics with a lack of understanding** | **Membership Consensus? (Yes/No)** | **What additional research would be beneficial?** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |

***E. Who Are We? Building a Culture of Innovation & Creativity***

1. **There is an understanding by the network staff and board members of the intention of the current HRSA Network Development Planning Grant program.**  
    ☐ Fully

☐ Mostly

☐ Generally

☐ Somewhat

☐ Barely

1. **How does your Board define innovation? What one example of innovation could you document?**

1. **How does creativity show up in your Board strategic planning?**

1. **As you review your Board members, are 50% or more of them innovators in their communities and/or organizations? If not, how might you grow this capacity in your Board members?**

1. **What do you believe are some of the top challenges you will encounter during this planning year as you work in starting up this Network? Rate each challenge from 1 to 5 (1 = Impossible to resolve, 5 = Easy to resolve). What resources will you use to resolve these challenges?**

|  |  |  |  |
| --- | --- | --- | --- |
| **Start-up Challenges for your Network** | **Identify the Stakeholders** | **Rate the Challenge (1-5)** | **Potential Resources for Resolution** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |