

Assessing Partnership Fit

Instructions

1. Fill in the information under **Your Organization** first, and gather as much data as you can. Think about your answers in the context of partnering if something does not seem clear.
2. Have potential partners complete the information under **Potential Partners**. Again, think about answers in the context of partnering.
3. You may choose to complete this tool together; remember, though, this tool asks for a good deal of information that could be gathered in advance of meeting

Optional Data & Documents to Supplement this Process

- Organizational strategic plans, agreements, documents with partners, policies and procedures manuals
- Services, budgets, funding requirements, information on data collection and management
- Program flowcharts, overviews, client needs assessments

Your Organization

Your Potential Partner

General		
Mission		
Target Population(s)		
Location		
Direct Service Staff Structure		
Approval/Decision Making Process & Key Staff		
Top 3-5 Organizational Goals or Priorities		
What we do BEST		
Current Services		
Committed to prioritizing homeless and chronically homeless individuals?		
Array of services offered		
Mental Health		
Who Provides these services?		
How do clients access this service?		
Location services		
Any funding restrictions?		

Your Organization**Your Potential Partner**

Current services needs or gaps		
Medical Health		
Who provides these services?		
How do clients access this service?		
Location of services		
Any funding restrictions?		
Current Services Needs or Gaps		
Substance Use Services		
Who provides these services?		
How do clients access this service?		
Location of services		
Any funding restrictions?		
Current services Needs or Gaps		
Other Services		
Who provides these services?		
How do clients access this service?		
Location of services		
Any funding restrictions?		
Current Services Needs or Gaps		
Current services needs or funding gaps?		
Data		
Current database(s) used for services data		
Is data shared with anyone outside of the organization? If yes, what is shared? How is it shared?		

Your Organization

Your Potential Partner

Would client release allow access to all data?		
Partnership Readiness		
Existing community collaborations (any kind)		
Existing partnerships or coordinated care efforts in health		
Capacity for Partnership - staff champions or resources?		
Partnership Needs		
Partnership Goals		
Leadership buy-in for partnerships of this kind?		
Who is driving this partnership effort? Role(s) at organization:		
Funding		
How are services currently funded?		
What are the major restrictions on funding?		
Do you receive funding for purposes of collaborating or partnering? If yes, what is required?		
Do you receive Medicaid funding? What does your funding structure look like around this?		
Do you help your clients enroll in Medicaid?		
Innovation Factor		
Are you willing to take risks? What is the most innovative program you've developed? How comfortable is your organization with ambiguity?		
Are you planning for future changes in health: MCOs, ACOs, system-wide collaborations?		

Your Organization

Your Potential Partner

Do you see yourself as a community leader? In which ways?