



## Developing Meaningful Stakeholder Partnerships

Stakeholder partnerships have been the cornerstone of successful school-based health centers (SBHCs) since their inception in the 1970s. Engagement of key SBHC stakeholders (from within the target community and school) in the initial planning steps is critical. These activities include: conducting a needs assessment, developing the mission and vision, determining location and facility, selection of medical sponsor, program development, pro-forma financial statement development, securing funding, implementation, and evaluation. Inclusion of key stakeholders in these activities will help ensure the proposed model accurately reflects the most relevant needs and concerns, and that it is well received and utilized.

### Form SBHC Planning Group

It is critical to recruit stakeholder partners for the planning group/committee who are decision makers. It is advisable to begin by identifying a core set of stakeholders who are most likely to become the SBHC collaborating partners. The planning group/committee can be expanded to include additional representatives from children and family service agencies and organizations, as the core members of the planning group/committee deem necessary.

### Create Formal Agreements

It is good business practice for the core group of SBHC stakeholder partners to create a wraparound linkage agreement, such as a letter of agreement (LOA) or a memorandum of understanding (MOU), which spells out the SBHC collaboration. This agreement must include: joint responsibilities, liabilities, expectations, revenue generation, failure to perform, individual roles of each agency/organization, responsibilities, and contribution to the SBHC (in-kind space, staff, supplies).

#### POTENTIAL STAKEHOLDER PARTNERS

- School district superintendent
- School principal
- School nurse
- School staff
- Students & families
- Local primary care providers
- Hospitals
- Federally-Qualified Health Centers
- Health department
- Behavioral health & social service agencies
- Dentists
- Medical & dental societies
- Business and faith organizations
- Community colleges & universities

## Maintain an SBHC Advisory Committee

Once the SBHC is opened, the planning group/committee will transition into the SBHC advisory committee. The SBHC advisory committee members will continue to participate in the following activities: provide input into the SBHC's promotion and marketing; conduct monitoring and oversight; obtain feedback on satisfactory performance; develop funder relationships and conduct fundraising; expand programming and services; and advocate for SBHCs at the local, state, and national levels. Successful collaborative partnerships are critical to the long term financial sustainability of SBHCs.

It is important to determine which type of partnership you are seeking with each stakeholder. There are three established partnership levels which can be pursued:

**COOPERATION** – Informal relationships; shared information only; separate goals, resources and structures.

**COORDINATION** – longer-term effort around a project/task; some planning and division of roles; some shared resources, rewards and risk.

**COLLABORATION** – more durable and pervasive relationships; new structure with commitment to common goals; all partners contribute resources and share rewards and leadership.

To help you map out a framework for stakeholder partnerships fill out the *Partnership Action Plan* below.

## Partnership Action Plan<sup>\*</sup>

1. What are you trying to accomplish? What is the time frame for achieving these outcome(s)/goal(s): Short-term (w/in 6 mos-1 year), Intermediate (1-2 years), Long-term (3-5 years)? What type of partnership(s) is/are needed to achieve these outcomes/goals: Cooperation, Coordination, or Collaboration? Potential partner(s)?

Outcomes /Goals	ST- Short-term, IT - Intermediate LT - Long-term	Type of Partnership(s)	Potential Partner(s)

<sup>\*</sup> Adapted from *Collaboration Handbook*, by Michael Winer and Karen Ray.

2. For each potential partnership: Who is/are the appropriate contact(s) in partnership organization? Who in the partnership organization has the authority to make decisions? Who in your organization takes the lead? Who in your organization has the authority to make decisions?

Potential partner(s)	Partnership contact(s)	Partnership decision maker(s)	Your organization lead(s)	Your organization decision maker(s)

3. For each partnership(s): What action steps are needed to move it/them forward? In what order should the steps take place? How will the work be done: By staff? Groups? Sub groups? Combinations? Who is responsible for each step? What is the frequency of communication/timeline for each step?

Objectives	Action steps to accomplish objectives	Lead convener	Timeline / deadline

4. Sketch the organizational chart of the partnership (include each partner's contribution to the partnership/collaboration).

5. What resources are needed to make this partnership work? Administrative? Development? Advocacy? Staffing? Who/what will be the source of these resources (members, the community, in-kind funding, etc.)? Who manages these resources?

Resources needed	Who/what source(s)	Who/how is resource(s) managed?