KEY INDICATORS FOR A THRIVING SAMARITAN CENTER

Samaritan Counseling Centers are diverse in structure, sponsorship, and services. Yet over the past thirty-five years, certain basic organizational qualities have emerged as hallmarks of strong, healthy Centers. The Samaritan Institute lists the following as key indicators for an organizationally sound and economically viable Samaritan Center.

1. A clear identity as a Samaritan Center, strategically located to extend the ministry of local congregations and other faith communities.

2. A reputation in the religious and other professional communities for providing top-quality services at a reasonable cost.

3. A strong and balanced working board of directors which actively leads through policy-making, funding, and community advocacy.

4. Executive leadership that promotes and manages the organization and is accountable for the quality of the Center's services and its financial health.

5. A staff of three or more full-time state-credentialed clinicians competent to integrate the resources of religion and spirituality with the behavioral sciences.

6. Educational and consultative services which focus on the healthy development of individuals, couples, families, and organizations.

7. Staff policies and practices that meet appropriate requirements to receive reimbursement from managed care organizations, other third party payers, and funding organizations while adhering to HIPAA and other government statutes and regulations.

8. An effective, efficient, evolving management system for executive, administrative, and clinical functions.

9. Viability as a small business which balances its budget, reports its financial condition in an accurate and timely manner, maintains at least a three-month cash reserve, and anticipates potential opportunities and threats.

10. Optimal size to be cost effective and competitive in its market, to deliver more than 3,600 clinical hours, and to have the ability to provide educational and consultative services.

11. A planned growth strategy that is adaptive to market conditions, health care changes, staff resources, service diversification, and financial circumstances.

12. Sources of contributions to support new program development, and to pay for services discounted below break-even costs.