Health Outreach Partners has identified six dimensions of outreach program integration.

DIMENSIONS OF INTEGRATION	NOT INTEGRATED	MODERATELY INTEGRATED	FULLY INTEGRATED
ALIGNMENT OF GOALS The degree of alignment between the goals of the health center and the outreach program.	Little or no alignment with the clinic plan, business plan and/or strategic plan of the health center.	Outreach program goals may align with health center goals but are not well operationalized.	Outreach program goals and objectives flow directly from the overall clinical or business goals and objectives of the health center.
<b>LEADERSHIP</b> The degree of integration of outreach program staff and priorities with health center leadership.	Health center leadership does not advocate for outreach program.	Outreach program may be endorsed by leadership but outreach staff may not participate in decision-making.	Outreach staff participate in health center strategic decision-making. Health center leadership fully supports the outreach program.
<b>COMMUNICATION</b> The extent of communication between outreach staff and clinical and administrative staff.	Little to no communication between the outreach staff and clinical and administrative staff.	Communication occurs between outreach staff and clinical staff but may be limited or infrequent.	Regular communication between outreach and clinic staff regarding organizational-level and/or patient- level initiatives and activities.
INFRASTRUCTURE The level of infrastructure development (e.g., program plan, job descriptions, protocols, tracking tools).	Outreach program has little infrastructure.	Outreach program has been institutionalized to some degree but is still vulnerable to changes in leadership or funding.	Robust infrastructure includes a program plan, job descriptions, protocols, and tracking tools.
<b>EVALUATION</b> The degree to which the outreach program's contributions to the health center is optimized via measurment and evaluation	Outreach program is minimally measured or evaluated.	Outreach program may collect some measures of success but lack an evaluation plan and/or be limited by inconsistent data collection.	Outreach program has a clear evaluation plan and outreach is optimized through ongoing evaluation activities.
FINANCIAL The degree to which outreach costs are included in the health center's overall budget.	Outreach program is entirely volunteer driven or grant funded with no or limited plans for sustainability.	Outreach program may be partially funded by the health center core budget but remains vulnerable to changes in grant funding or budget priorities.	Outreach program is fully integrated into the health center operating budget.

