Section 1 — General information

Introduction — The purpose of this survey is to gain a more complete understanding of existing shared service arrangements among a group of public health agency jurisdictions as a management strategy to provide essential public health services in those jurisdictions. Having a complete list of agreements, their purposes, and their characteristics may provide helpful information to assess their current utility and to plan additional sharing initiatives. This survey should take about 10 minutes.

The survey should be completed by each public health agency involved in the cross-jurisdictional sharing (CJS) activities of interest. For example, if a group of 12 health departments in the northwest area of a state wish to examine their existing sharing agreements, each of them will complete a survey.

Definitions — For the purposes of this survey, we are defining shared services as *sharing of resources (such as staffing or equipment or funds) among public health departments on an ongoing basis* (or, in the case of mutual aid agreements, on an as-needed basis). In some cases one or more partners may provide resources to support other partners. In other cases, partners may contribute jointly to assure the resources necessary for a shared service. The resources could be shared to support: a) Programs (like a joint WIC or environmental health program); b) Capacity (e.g., a shared epidemiologist in support of several programs); or c) Organizational functions (such as human resources or information technology). The basis for resource sharing as defined here can be *formal* (a contract or other written agreement) or *informal* (a mutual understanding or agreement). Another way to look at this is that each employee, project, resource, service, etc. that spans more than one public health agency jurisdiction is considered a shared resource.

What is not included in this definition? District agencies are, by their nature, cross-jurisdictional agencies and their programs will not be considered as shared services. However, if a district agency is providing (or receiving) services in a neighboring jurisdiction that is not within their district, those services would be considered shared. Resources shared among programs in the *same* jurisdiction, i.e., partnerships among departments in the same jurisdiction, are not considered shared services for the purpose of this survey.

Additional Resources — The Center for Sharing Public Health Services has other assessment tools for public health available on its website. See the complete list of available tools in the last section of this survey.

Section 2 — Your health department and shared services

Note: Q2.1 will ask you to choose a project name for your group. **All public health jurisdictions in your group that complete the survey should use EXACTLY the same project name.**

Q2.1: Your project name: Click or tap here to enter text.

Q2.2: Your name: Click or tap here to enter text.

Q2.3: Your job title: Click or tap here to enter text.

Q2.4: Health department: Click or tap here to enter text.

Q2.5: Address: Click or tap here to enter text.

Q2.6: City/town: Click or tap here to enter text.

Q2.7: State: Click or tap here to enter text.

Q2.8: ZIP code: Click or tap here to enter text.

Q2.9: Your email address: Click or tap here to enter text.

Q2.10: Phone number: Click or tap here to enter text.

Q2.11: Please indicate the jurisdiction type that your health department serves:

Town or township (1)

City (2)

County (3)

Tribe/tribal clinic (4)

Multi-jurisdictional district (including combined city/county) (5)

Section 3 — motivation for change

Q3.1: Is your governing body (e.g., Board of Health) in the process of exploring or implementing shared   
 service arrangements?

Yes (1)

No (2)

IF NO: This is the end of your survey. Thank you for your response.

If YES: Continue to Q3.2.

Q3.2: What reasons motivated your governance body (e.g., Board of Health) to explore or implement shared service arrangements? (Please check all that apply.)

Make better use of resources

Save money

Respond to program requirements

Aid in recruitment of qualified staff

Provide new services

Provide better services

Meet or prepare for voluntary accreditation requirements

Increase department's credibility in community

Increase department's independence

Policymaker interest

I don't know

Other (please specify): Click or tap here to enter text.

Q3.3: Key decision-makers and policymakers in my community support a vision for cross-jurisdictional sharing efforts.

Strongly Agree

Agree

Neutral

Disagree

Strongly Disagree

I Don't Know

Section 4 — Stage of CJS development

Q4.1: Which phase best describes the current status of your CJS efforts? (Check only one.)

**Explore** — We are developing a conceptual feasibility study to answer questions such as:   
 Why do we want to consider CJS? What services and capacities would be shared? Who are   
 the partners that should be involved?

**Prepare and Plan** — We are preparing an implementation plan to answer questions such as:   
 What governance options do we want to consider for our CJS initiative? Who will have the   
 authority to make decisions? What is the timeline for implementation? How can we achieve   
 a balance between increased efficiency and effectiveness?

**Implement and Improve** — We are implementing CJS initiatives.

Q4.2: Cross-jurisdictional sharing team members have worked to share and combine data and   
 information needed for public health decision-making.

Strongly Agree

Agree

Neutral

Disagree

Strongly Disagree

I Don't Know

SECTION 5 — LEADERSHIP

Q5.1: Roles and responsibilities of cross-jurisdictional sharing partners are clearly identified.

Strongly Agree

Agree

Neutral

Disagree

Strongly Disagree

I Don't Know

Q5.2: One or more policymaker champions have been identified to promote cross-jurisdictional sharing   
 efforts.

Strongly Agree

Agree

Neutral

Disagree

Strongly Disagree

I Don't Know

SECTION 6 — GOVERNANCE

Q6.1: Do you have a formal agreement among policymaking bodies to explore/implement a cross-  
jurisdictional sharing arrangement?

Yes

No

If “Yes” to Q6.1 is selected

Q6.1.A: Please indicate the nature of the written document(s). (Check all that apply.)

Contract

Memorandum of understanding

Joint powers agreement

Mutual aid agreement

Agreement to provide surge capacity

Board resolution or meeting minutes

Written agreement, but unsure how to classify

Other (please specify):

SECTION 7 – AREAS FOR SHARING

Q7.1: What are the areas for your current or planned CJS efforts? (Please check all that apply.)

|  |  |  |
| --- | --- | --- |
|  | Current  Efforts | Planned  Efforts |
| Emergency preparedness |  |  |
| Epidemiology or surveillance |  |  |
| Physician and nursing services |  |  |
| Communicable disease screening or treatment |  |  |
| Maternal and child health services |  |  |
| Population-based primary prevention programs |  |  |
| Inspection, permit, or licensing |  |  |
| Environmental health programs (other than inspection,   permit, or licensing) |  |  |
| Community health assessment |  |  |
| Strategic planning |  |  |
| Administrative, planning, and support services |  |  |
| Laboratory service |  |  |
| Other (please specify):Click or tap here to enter text. |  |  |
| We have not identified a specific area for CJS yet |  |  |

Section 8 — Closing

Q8.1: Do you have any other comments regarding service sharing among health departments?

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Section 9 — additional resources

[Assessment Tools for Public Health](https://phsharing.org/resources/assessment-tools-for-public-health/) — The Center for Sharing Public Health Services has these other assessment tools for public health available on its website.

**Existing Services —** A self-administered survey designed to gain a more complete understanding of existing public health services offered by a public health agency. (Publication Number: CSPHS/06-V1)

**Existing CJS Arrangements: Detailed Survey —** A self-administered survey designed to allow potential CJS partners a detailed and specific understanding of existing shared service arrangements among potential partners. (Publication Number: CSPHS/08-V1)

**One Existing CJS Arrangement —** A self-administered survey designed to help current or potential CJS partners (public health agency jurisdictions) gain a clear definition, and better understanding of one current or planned shared service arrangement. (Publication Number: CSPHS/09-V1)