

Characteristics of Cross-Jurisdictional Shared Services Arrangements Between Local Health Departments in Wisconsin



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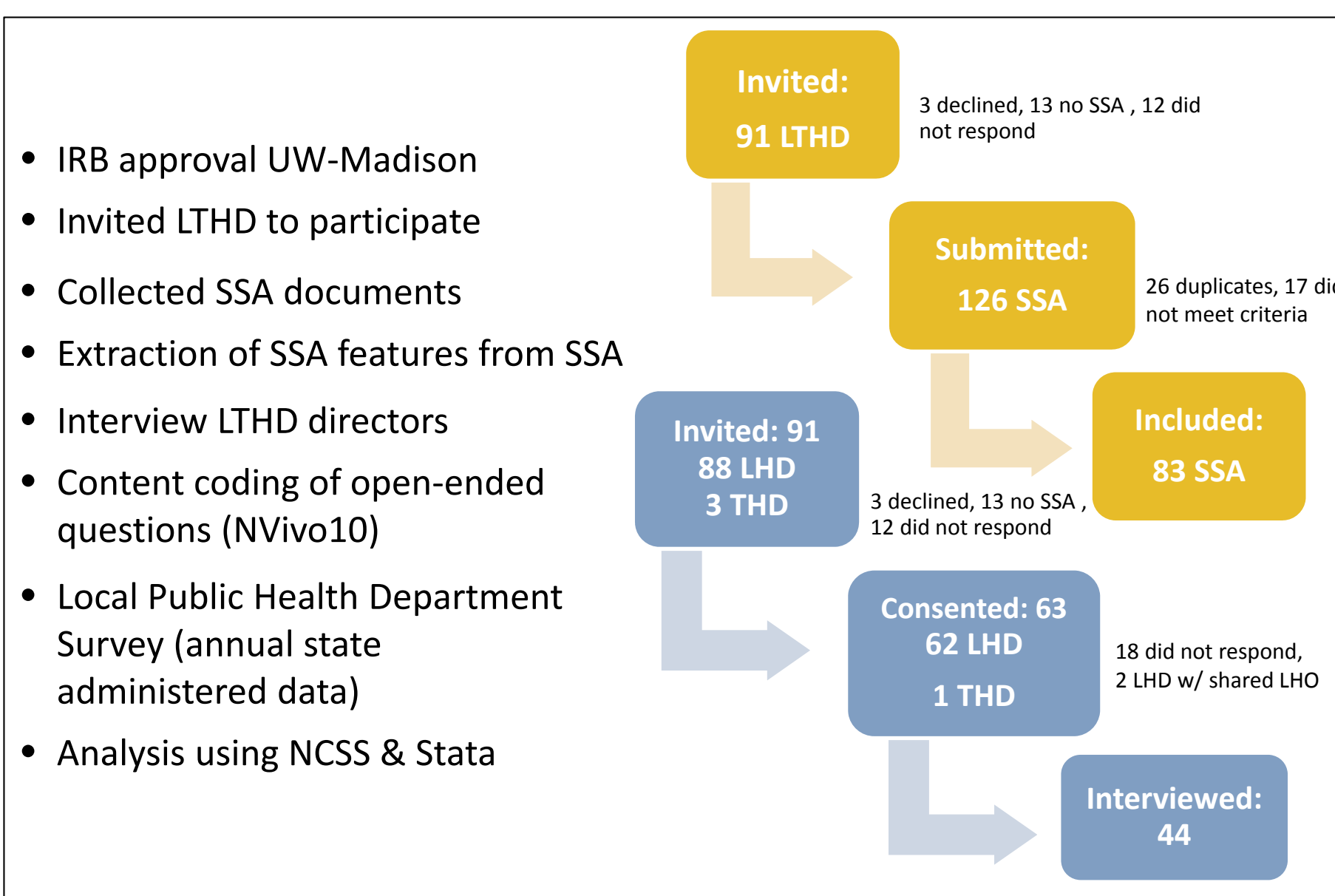
Shared Services Agreement

"A written document that describes, defines, or governs sharing of resources across jurisdictions on an ongoing or as needed basis. Shared resources may include, but are not limited to, organizational functions, staffing, programs, services, capacity, data, information, and technical assistance"

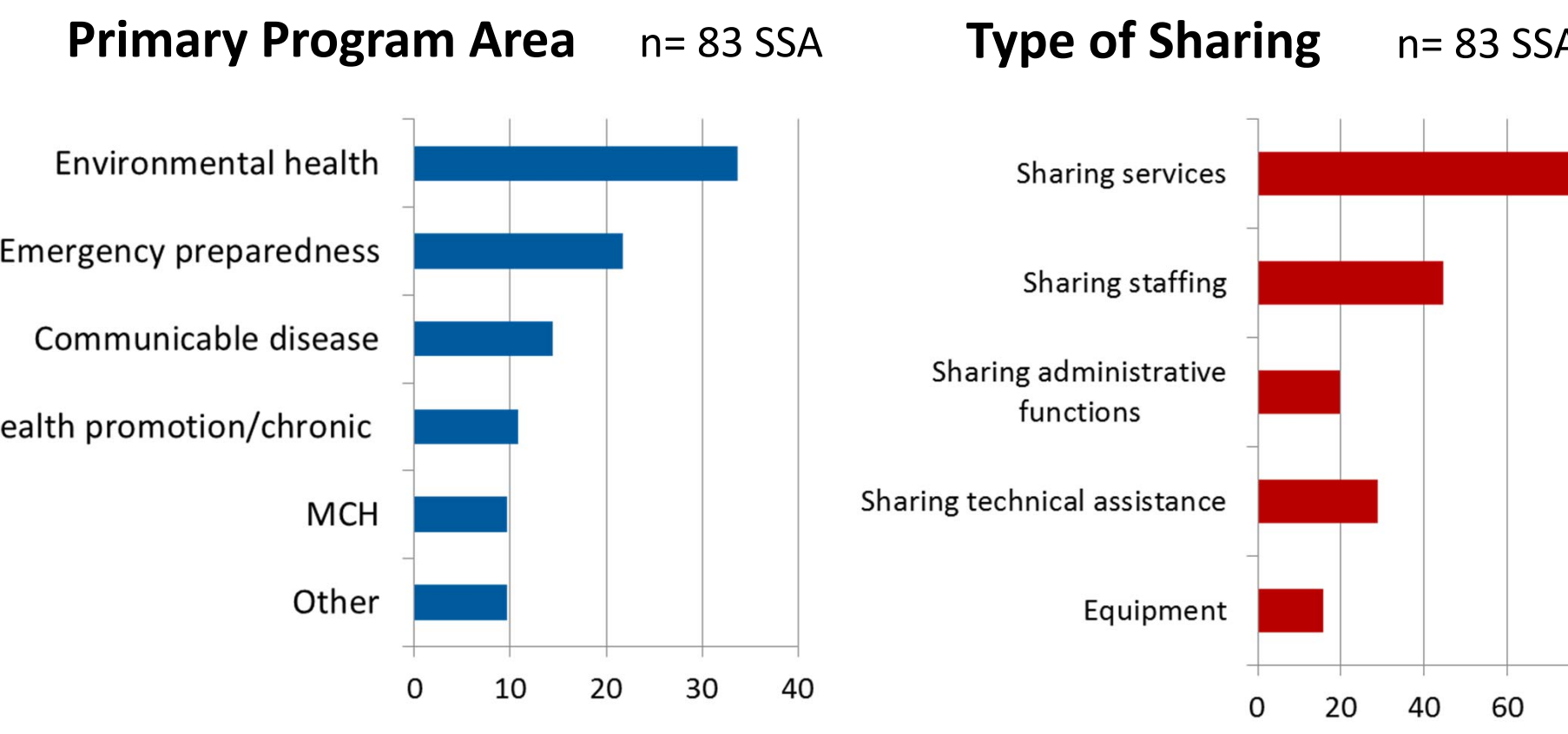
Specific Aims

1. Describe SSA and LHD characteristics, motivations, and expected outcomes
2. Measure extent of implementation
3. Measure performance in achieving expected outcomes

Methods

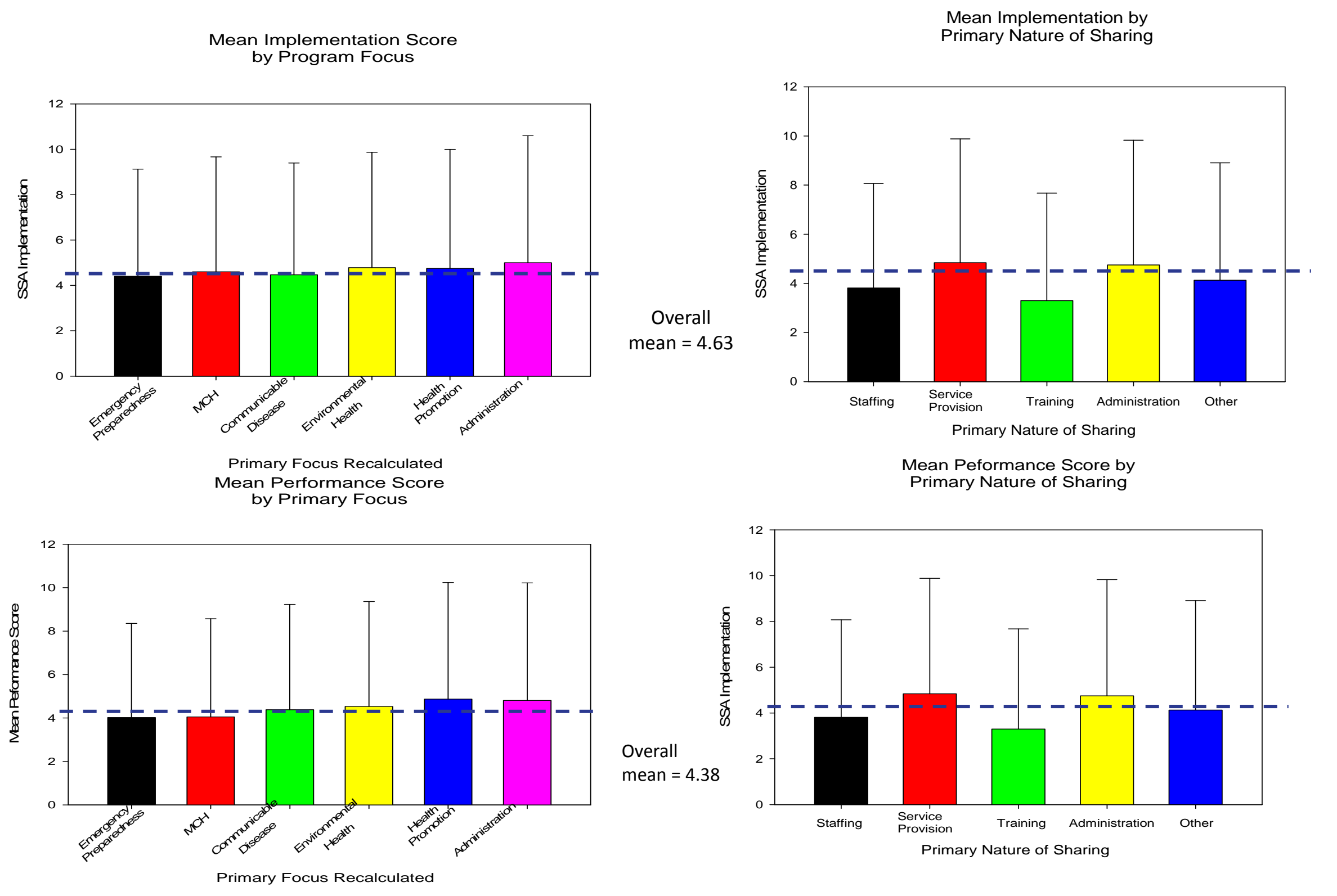
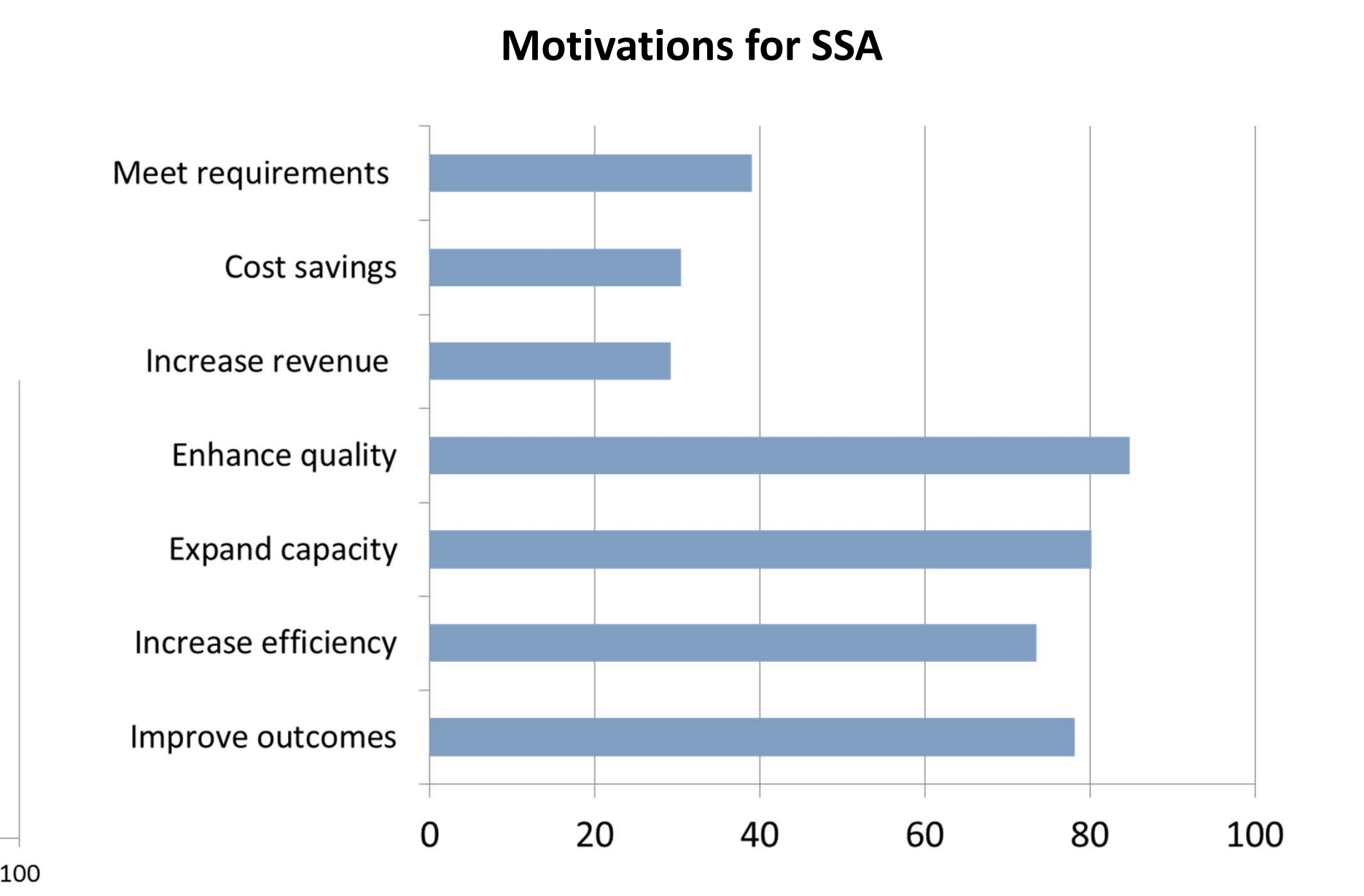
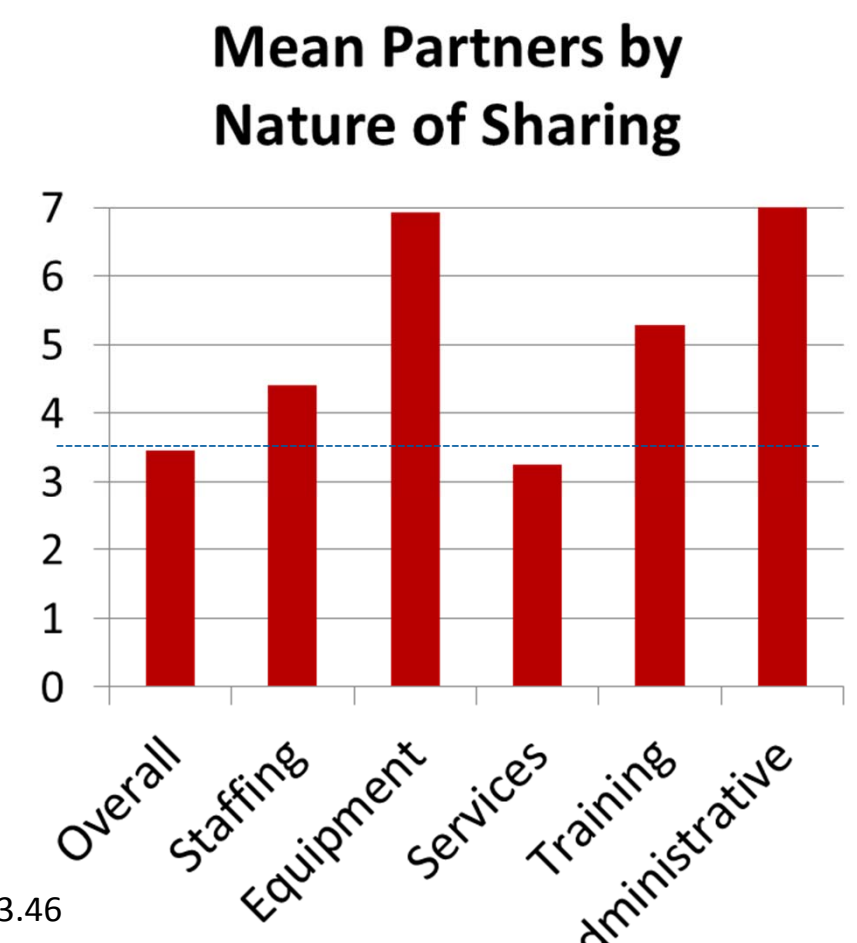
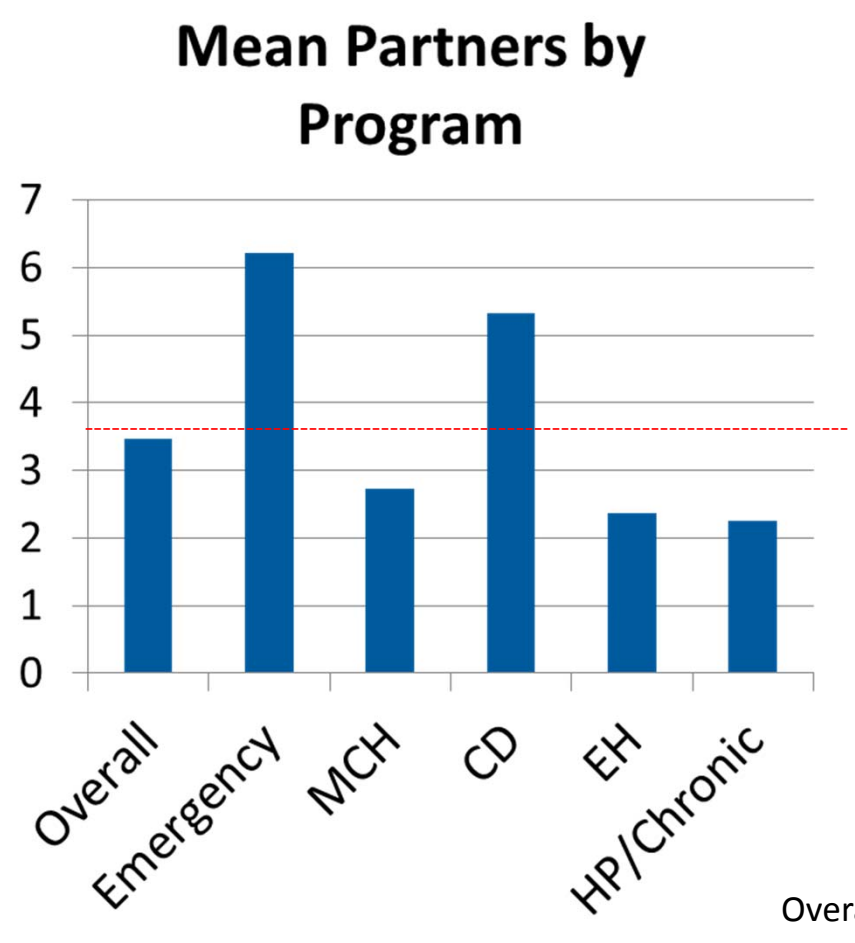


Results



Results (cont.)

- ### Number of Partners
- Mean = 3.46 partners/SSA SD=3.46; Min/max: 2-15 74% with 2 partners
 - 77/88 LHD (87.6%)
 - 5/13 Tribal (38.5%)
 - 7 other organizations
- ### Length of Term
- Min/max = 4 months to open-ended
 - 40% = 12 months
 - 33% = not specified



Discussion

- ### Practice/Policy
- SSA are common; current strategy
 - Used in a variety of program areas
 - Used in large and small LHD
 - Number of partners can vary; fit to purpose
 - More complete agreements (legal) may be stronger
- ### Research
- Primary data collection is challenging
 - Longitudinal study of impact

Limitations

- 50% of LHD directors participated
- Limited tribal participation
- May have missed some SSA meeting definition
- High mean scores for implementation and performance may limit ability to detect relationships in full model
- New/novel measures

Next Steps

- Further analysis
- Policy and practice recommendations
- Dissemination

Acknowledgements

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