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Cross-Jurisdiction Shared Services Arrangements in Local  
Public Health: Phase I

AcademyHealthPHSR Interest Group Meeting Sessions  
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# Cross-Jurisdiction Shared Services Arrangements in Local Public Health: Phase I

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## Overall Project Goal

To provide guidance to local public health professionals and policy makers on the use of shared service arrangements to improve efficiency and effectiveness of local public health service delivery.

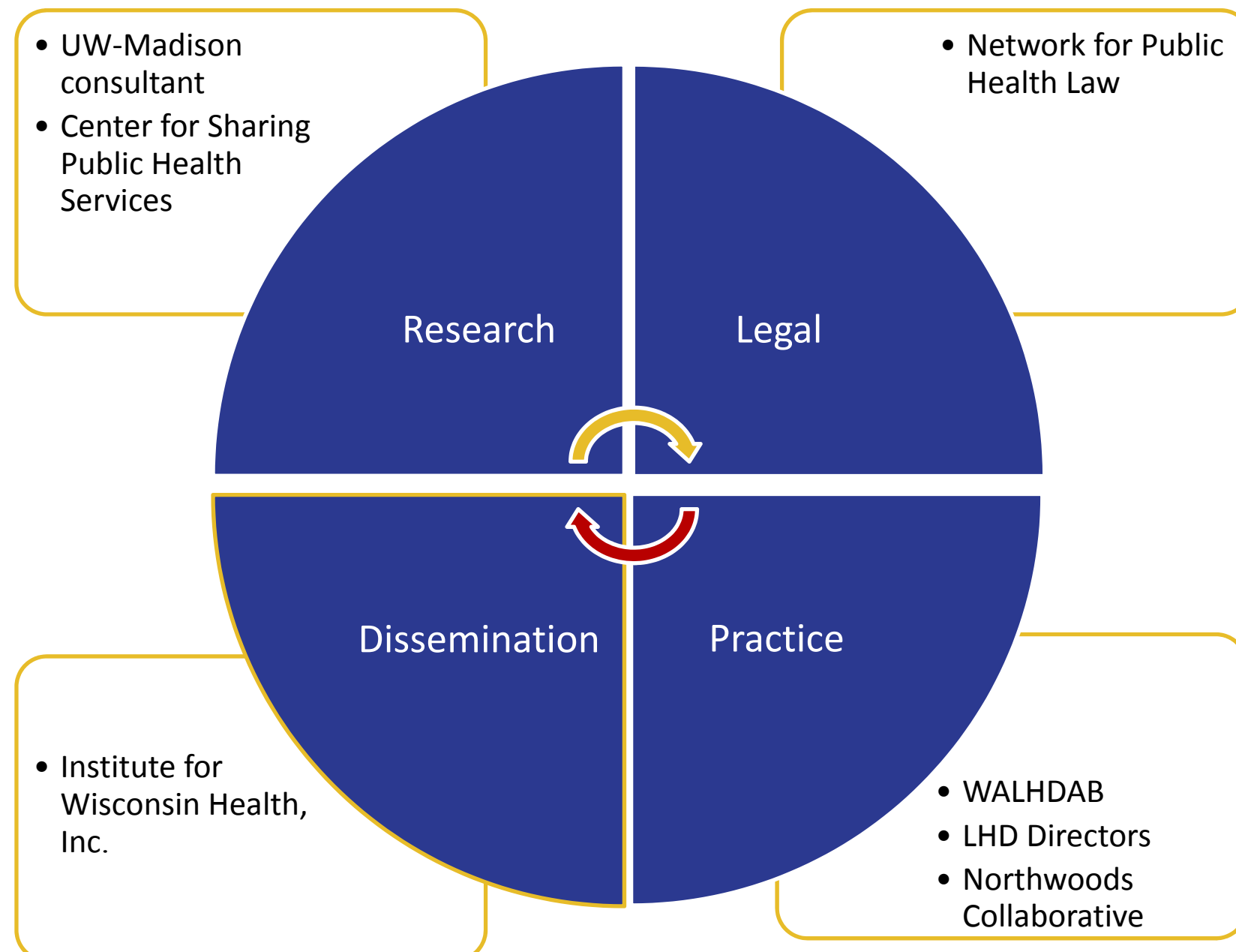
## Background

- Local and tribal health departments (LTHD) function in a context of limited resources and increasing pressure to improve performance
- Cross-jurisdiction shared service arrangements (CJSSA) is a strategy used by 50% of LHD nationally and 71% of LTHD in Wisconsin
- Motivators for initiating CJSSA include better use of resources, providing better services, and responding to program requirements (Madamala, et. al, 2014)

### Cross-Jurisdiction Shared Service Arrangements (CJSSA)

“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.”

## Study Advisory Team



## Research Aims

### Phase 1

- Describe the characteristics of written CJSSA between local public health jurisdictions (county, city, or tribal) in Wisconsin
- Describe motivations for entering into such arrangements
- Measure the extent of implementation of the arrangements
- Measure the perceived performance of the arrangements in meeting their expected outcomes.

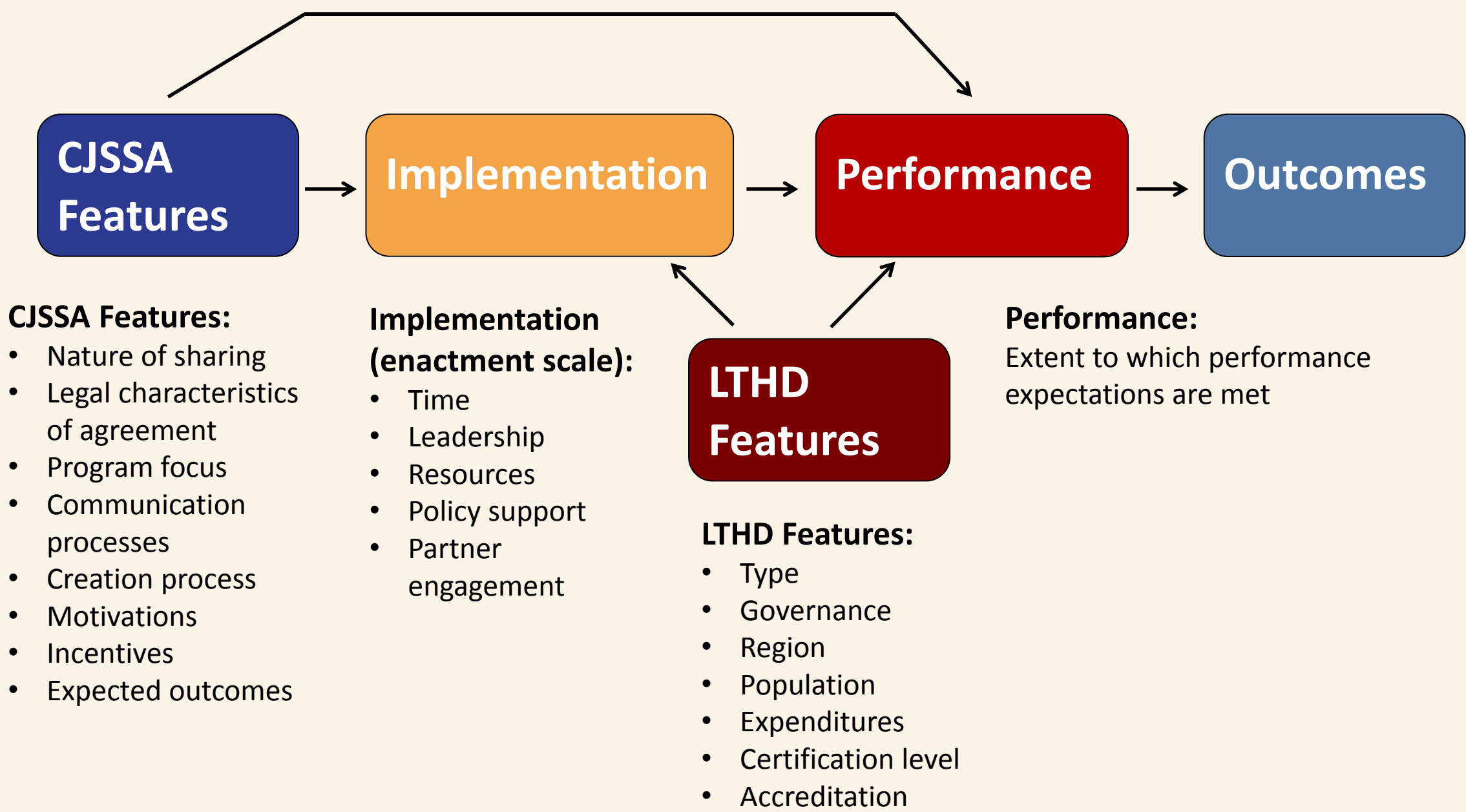
### Phase 2

- Analyze effects of CJSSA and LTHD features on implementation and performance using latent class analysis methods
- Document change in CJSSA use and motivations compared to baseline (2012)

## Study Design and Methods: Phase I

- Mixed methods study
- Extract data on CJSSA features from written documents
- Conduct key informant interviews with LTHD directors (verify archival data extraction and obtain perceptual measures of implementation and performance)
- Use secondary data sources to examine organizational characteristics associated with having CJSSA (Wisconsin Department of Health Services, 2002; Wisconsin Department of Health Services 2003-2012)

## Study Conceptual Framework



## Progress to Date

- Study Advisory Team established
- CJSSA extraction and interview tools developed
- UW-Madison Social Sciences IRB approval (LHD only)
  - Tribal IRB approval pending
- Recruitment in process
- Secondary data retrieval in process

## Next Steps

- Complete CJSSA data extraction
- Conduct interviews
- Revise/pilot test follow-up survey
- Consolidate Phase 1 findings
- Disseminate Phase 1 findings
- Conduct follow up survey
- Complete analysis
- Disseminate Phase 2 findings

## References

- Madamala, K., Young, N., Young, D., Giese, L., Brandenburg, T., & Zahner, S. (2014). Current and planned shared service arrangements in Wisconsin local and tribal health departments. *Journal of Public Health Management Practice*, 00(00), 1-7. doi:10.1097/PHH.0000000000000002
- Wisconsin Department of Health Services, Division of Public Health, Office of Health Informatics, Health Analytics Section. (2003-2012). *Local health department survey*. Retrieved from <http://www.dhs.wisconsin.gov/localdata/LHDSurvey.htm>
- Wisconsin Department of Health Services, Division of Public Health, Office of Health Informatics, Health Analytics Section. (2002). *Local health department survey*.

## Acknowledgements

### CJSSA Study Advisory Team Members and Project Staff

Linda Conlon, Oneida County Health Department; Chris Dobbe, Northwoods Collaborative, Marathon County Health Department; Bob Leischow, Wisconsin Association of Local Health Departments and Boards, Clark County Health Department; Gianfranco Pezzino, Center for Sharing Public Health Services; Kusuma Madamala, Independent Consultant; Angela Nimsgern, Wisconsin Division of Public Health, Northern Regional Office; Darren Rausch, Greenfield Health Department; Kim Whitmore, Wisconsin Division of Public Health, Office of Policy and Practice Alignment; Nancy Young, Institute for Wisconsin's Health, Inc.; Susan Zahner, University of Wisconsin-Madison, School of Nursing; Tracy Mrochek, University of Wisconsin-Madison, School of Nursing, Wisconsin Public Health Research Network; Adam Karlen, University of Wisconsin-Madison, School of Nursing

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