

Cross Jurisdictional Sharing Readiness Factors

The following are a set of readiness factors that organizations contemplating participation in the cross jurisdictional sharing (CJS) of services may want to review early in their collaboration process.

Readiness Factor 1: Motivation for Change

Have leaders in public health policy and policymakers articulated their individual or organizational interests/motivation for exploring a public health sharing arrangement? What are the key motivators for each group?

Have leaders and organizations (i.e., public health departments, governments, local hospitals, etc.) defined the need for change and articulated a new vision for the delivery of coordinated or integrated public health services?

Have leaders in public health and policymakers acknowledged that the existing local public health infrastructure is not sufficient to address the public health concerns of community or meet emerging performance standards and measures?

Are CJS efforts driven by an increased need for efficient and/or more cost effective public health services?

Is a vision for improved service and resource management through CJS efforts supported by key decision-makers and policymakers on all sides of potential CJS efforts?

Is there momentum for CJS efforts? Is there an increasing interest and commitment to coordinating public health efforts in the involved communities?

Readiness Factor 2: Trust Between Partners

Is there a history of collaboration between both public health policy and political partners? Have past collaborative efforts been a successful experience:

- At the policymaker level?
- At the programmatic level?

How effective is the public health and policymaker leadership in fostering respect, trust, inclusiveness and openness in the partnership?

Readiness Factor 3: Identified and Effective Leadership

Do CJS partners include representatives/leaders of public health agencies, county or city government public administration and elected officials from all involved jurisdictions?

To what extent are the roles and responsibilities of CJS planning partners clearly identified? Have leaders who champion or support a potential or ongoing CJS effort been identified or emerged?

Has responsibility for the partnership and CJS efforts been conferred and endorsed by all parties involved? How well are leaders able to obtain needed support from individuals and organizations in the community that can

either block or help ensure success of CJS efforts?

How effective is leadership in resolving conflict among partners?

Readiness Factor 4: Commitment to Change / CJS Efforts

Have partners documented an agreement among key policymaking bodies and stakeholders to begin exploration or consideration of a CJS arrangement?

Have partners documented an agreement among key policymaking bodies and stakeholders to implement a CJS arrangement?

Do CJS agreements involve, at a minimum, shared capacity and joint oversight for some public health functions?

To what extent are data being collected on the service and/or efficiency benefits of CJS collaboration?

What challenges can be expected within the partner CJS communities that will need to be overcome?

What is the timeline for the planning or implementation of CJS efforts?

Readiness Factor 5: Effective Collaboration

To what extent is there a process for identifying duplication of services, underused assets and service gaps?

To what extent do CJS partners have the necessary resources and capacity to understand and deal with the legal issues surrounding CJS efforts?

To what extent has a model for CJS efforts been agreed upon by partners?

To what extent have roles and responsibilities of a collaborative system been outlined in a formal, written agreement?

In collaborative and planning efforts, how well are partners able to include the views and priorities of the people, organizations and jurisdictions affected by the partnership's work?

Are the needs of specific populations in each community documented and addressed by CJS plans/efforts as appropriate for the planned shared service?

In collaborative and planning efforts, are partners able to develop goals that are widely understood and supported among partners?

Are CJS efforts intended to be comprehensive activities that connect multiple services, programs or systems?

Readiness Factor 6: Common Policies, Protocols, Procedures and Data Management

To what extent have partners begun working to develop a common language within the CJS efforts?

To what extent have CJS team members worked together to apply for and/or manage grants and funds?

To what extent have CJS team members developed/disseminated materials, information and processes that keep

key policymakers and stakeholders informed of progress and challenges?

To what extent have CJS team members worked to share and combine data and information needed for public health decision-making (e.g., statistical data, information about community perceptions, values, resources and politics)?

To what extent do CJS partners agree upon best practices for public health services to be shared across communities for the services to be shared?

Readiness Factor 7: Access to Financial and Other Capital Resources

Does the CJS partnership have access to financial and other capital resources in order to work effectively and achieve its goals?

- Money
- Space
- Equipment and goods

To what extent have project partners agreed upon decisions/established agreements regarding resource sharing?