NACCHO
National Association of County & City Health Officials

Center for Sharing Public Health Services
Rethinking Boundaries for Better Health

Readiness Factors for Shared Services Arrangements Between Local Health Departments and Health Centers

How to Use This Tool

This tool was prepared by the Center for Sharing Public Health Services (the Center) to help evaluate levels of readiness between local health departments (LHDs) and health centers (HCs) that are considering or are already involved in collaborating through shared services arrangements. The tool has been adapted specifically to be applicable to resource sharing between local health departments (LHDs) and health centers (HCs) or federally qualified health center "look-alikes," as defined by Section 330 of the Public Health Service Act. This document is part of a set of six tools produced by the Center in collaboration with the National Association of County and City Health Officials (NACCHO).

This document contains a series of questions organized under headings which represent areas that should be considered when assessing readiness. Please keep in mind some assumptions and limitations while using this document.

1. This guide is primarily a tool to stimulate conversations among the parties involved, so it does not replace the need for more in-depth discussion. It is recommended that the survey be completed as a group effort and the results then be discussed by the entire team, paying particular attention to areas that scored relatively low or areas for which there is disagreement among team members or organizations about how to score the items.

2. The questions should be used as general guidance, not as a step-by-step guide.

3. Some questions may not be universally applicable, and the order in which items are arranged may need to be changed depending on local needs and circumstances.

4. Some sections may need to be modified depending on the specific characteristics of the programs or services to be shared.

5. It is recommended that the tool be used early in the exploration and planning phases of the arrangement. The tools also can be used again any time the involved parties wish to re-assess their readiness levels; for example, if important components of the sharing arrangement are changed, added or removed.

6. While the scores can provide helpful information about areas of relative strength or opportunities for improvement, those numbers alone are not very meaningful if taken outside of each sharing arrangement's context. Do not focus too much attention on the scores; rather, use the scores as opportunities for broader, more meaningful discussions.

7. Once areas for improvement are identified, the parties should make a plan on how to address them. They can use processes or tools available from a variety of sources, including some on the Center's website at https://phsharing.org.

This document is only one component of a careful exploration and planning of a sharing arrangement that must take place. That process is described in the *Roadmap to Develop Shared Services Arrangements Between Local Health Departments and Health Centers*.

Instructions for Administration

Have the survey completed as a team and answer each question.

For scoring purposes, use the following definitions:

"No" = not at all addressed or considered;

"Somewhat" or "Some" = addressed or considered to a moderate extent;

"Sufficiently" = addressed or considered to an adequate degree; and

"Yes" = completely addressed and confirmed.

Note: some questions may have fewer than four possible answers. To calculate the score for each readiness factor, enter the score of each answer in the factor summary score table at the end of each section.

Readiness Factor 1: Motivation for Change

Have the collaboration partners defined the need for change?

	☐ No	☐ Somewhat	☐ Yes
Score	0.0	1.0	2.0

RF1-2. Have the collaboration partners articulated a shared vision for the delivery of coordinated or integrated public health and clinical services?

☐ No	☐ Somewhat	☐ Yes
0.0	1.0	2.0

RF1-3. Have the collaboration partners (including their governing bodies, when appropriate and applicable) clearly articulated their individual or organizational interests/motivation for exploring an LHD-HC collaborative arrangement?

☐ No	☐ Somewhat	☐ Yes
0.0	1.0	2.0

What are the key motivators for each group? *(List below.)*

RF1-4. Are the key motivators for each group compatible?

        ☐ No   ☐ Somewhat   ☐ Yes

        0.0   1.0   2.0

RF1-5. Have the LHD and HC leadership acknowledged the difficulties in addressing the health concerns of the community or meeting emerging performance standards and measures?

        ☐ No   ☐ Somewhat   ☐ Yes

        0.0   1.0   2.0

RF1-6. Is there momentum for LHD-HC collaborative efforts?

        ☐ No   ☐ Somewhat   ☐ Yes

        0.0   1.0   2.0

RF1-7. Is there an increasing interest and commitment among stakeholders to coordinate LHD-HC collaborative efforts in the involved communities?

        ☐ No   ☐ Somewhat   ☐ Yes

        0.0   1.0   2.0

RF1-8. Is a vision for improved service and resource management through LHD-HC collaborative efforts supported by key decision-makers on all sides of the potential collaboration?

        ☐ No   ☐ Somewhat   ☐ Yes

        0.0   1.0   2.0

Summary score table for RF1:

Question	RF1-1		RF1-2		RF1-3		RF1-4		RF1-5		RF1-6		RF1-7		RF1-8		RF1 Total
Score		+		+		+		+		+		+		+		=	

Readiness Factor 2: Trust Between Partners

RF2-1. Is there a history of collaboration between the LHD and HC partners?

        ☐ No   ☐ Somewhat   ☐ Yes
        0.0   1.0   2.0

RF2-2. Have past collaborative efforts been a successful experience at the policymaker level?

        ☐ No   ☐ Somewhat   ☐ Yes
        0.0   1.0   2.0

RF2-3. Have past collaborative efforts been a successful experience at the programmatic level?

        ☐ No   ☐ Somewhat   ☐ Yes
        0.0   1.0   2.0

RF2-4. Are the concepts of respect, trust, inclusiveness and openness emphasized in the partnership?

        ☐ No   ☐ Somewhat   ☐ Yes
        0.0   1.0   2.0

Summary score table for RF2:

Question	RF2-1		RF2-2		RF2-3		RF2-4		RF2 Total
Score		+		+		+		=	

Readiness Factor 3: Identified and Effective Leadership

RF3-1. Do LHD-HC collaborative partners include representatives/leaders from all sectors of the partnership?

☐ No ☐ Somewhat ☐ Yes
0.0 1.0 2.0

RF3-2. To what extent are the roles and responsibilities of LHD-HC collaborative partners clearly identified?

☐ No extent ☐ Some extent ☐ Sufficient extent ☐ Great extent
0.0 1.0 1.5 2.0

RF3-3. Have leaders who champion or support a potential or ongoing LHD-HC collaborative effort been identified?

☐ No ☐ Somewhat ☐ Yes
0.0 1.0 2.0

RF3-4. Has responsibility for the partnership and collaborative efforts been conferred and endorsed by all parties involved?

☐ No ☐ Somewhat ☐ Yes
0.0 1.0 2.0

RF3-5. How well have leaders secured needed support from individuals and organizations in the community that can influence the success of collaborative efforts?

☐ Not well ☐ Somewhat well ☐ Sufficiently well ☐ Very well
0.0 1.0 1.5 2.0

RF3-6. How effective is leadership in resolving conflict among partners?

☐ Not at all effective ☐ Somewhat effective ☐ Very effective
0.0 1.0 2.0

Summary score table for RF3:

Question	RF3-1		RF3-2		RF3-3		RF3-4		RF3-5		RF3-6		RF3 Total
Score		+		+		+		+		+		=	

Readiness Factor 4: Commitment to Change/Collaborative Efforts

RF4-1. Have partners received an agreement among key policymaking bodies and stakeholders to begin exploration or consideration of a collaborative arrangement?

☐ No	☐ Somewhat	☐ Yes
0.0	1.0	2.0

RF4-2. Is there support to develop shared capacity and/or joint oversight for some public health and/or clinical functions?

☐ No	☐ Somewhat	☐ Yes
0.0	1.0	2.0

RF4-3. To what extent is there support to collect and share data on the service and/or efficiency benefits of collaboration?

☐ No extent	☐ Some extent	☐ Sufficient extent	☐ Great extent
0.0	1.0	1.5	2.0

RF4-4. Is community support important for the collaboration?

☐ No	☐ Somewhat	☐ Yes
0.0	1.0	2.0

Summary score table for RF4:

Question	RF4-1		RF4-2		RF4-3		RF4-4		RF4 Total
Score		+		+		+		=	

Readiness Factor 5: Effective Collaboration

RF5-1. To what extent is there a process for identifying duplication of services, underused assets and service gaps?

☐ No extent   ☐ Some extent   ☐ Sufficient extent   ☐ Great extent

0.0   1.0   1.5   2.0

RF5-2. To what extent do partners have the necessary resources and capacity to understand and deal with the legal issues surrounding collaborative efforts?

☐ No extent   ☐ Some extent   ☐ Sufficient extent   ☐ Great extent

0.0   1.0   1.5   2.0

RF5-3. To what extent have models for collaborative efforts been considered by partners?

☐ No extent   ☐ Some extent   ☐ Sufficient extent   ☐ Great extent

0.0   1.0   1.5   2.0

RF5-4. In prior collaborative and planning efforts, how well were partners able to reflect the views and priorities of the people, organizations and jurisdictions affected by the partnership's work?

☐ Not well   ☐ Somewhat well   ☐ Sufficiently well   ☐ Very well

0.0   1.0   1.5   2.0

RF5-5. Are the needs of specific populations in the community, including those currently underserved or disadvantaged, documented and addressed by collaborative plans/efforts as appropriate for the planned shared services?

☐ No   ☐ Somewhat   ☐ Yes

0.0   1.0   2.0

RF5-6. In collaborative and planning efforts, have partners developed goals that are widely understood and supported among partners?

☐ No   ☐ Somewhat   ☐ Yes

0.0   1.0   2.0

Summary score table for RF5:

Question	RF5-1		RF5-2		RF5-3		RF5-4		RF5-5		RF5-6		RF5 Total
Score		+		+		+		+		+		=	

Readiness Factor 6: Access to Financial and Other Capital Resources

RF6-1. Does the partnership have access to financial and other capital resources in order to work effectively and achieve its goals?

a. Funding:

☐ No   ☐ Somewhat   ☐ Yes
0.0   1.0   2.0

b. Space:

☐ No   ☐ Somewhat   ☐ Yes
0.0   1.0   2.0

c. Equipment and goods:

☐ No   ☐ Somewhat   ☐ Yes
0.0   1.0   2.0

RF6-2. To what extent have project partners considered and discussed resource sharing?

☐ No extent   ☐ Some extent   ☐ Sufficient extent   ☐ Great extent
0.0   1.0   1.5   2.0

Summary score table for RF6:

Question	RF6-1a		RF6-1b		RF6-1c		RF6-2		RF6 Total
Score		+		+		+		=	

Final Scoring

Enter the total from each RF summary score table below and divide by the RF potential maximum total, as indicated in the table.

Readiness Factor		Factor Total		Potential Maximum Total		Readiness Score
RF1 Total	=		÷	16	=	
RF2 Total	=		÷	8	=	
RF3 Total	=		÷	12	=	
RF4 Total	=		÷	8	=	
RF5 Total	=		÷	12	=	
RF6 Total	=		÷	8	=	
RF SUM	=		÷	64	=	

Sum each Readiness Factor Total to get the RF SUM. Divide the RF SUM by the potential maximum total to get an overall Readiness Factor Score. Compare the scores to the chart below for evaluation.

Readiness Level	Scores
Readiness is "Very Good"	0.90 – 1.00
Readiness is "Good"	0.80 – 0.89
Readiness is "Fair"	0.70 – 0.79
Readiness is "Low"	0.6 – 0.69
Readiness is "Poor"	< 0.6

As noted earlier in the document, scores alone are not very meaningful and should be interpreted within the context of the sharing arrangement. Organizations with scores at the "Fair," "Low" and "Poor" levels should note the factors and questions on which they scored poorly and consider addressing the issues directly as appropriate. For additional guidance, see Factors that Contribute to Successful Shared Services Arrangements Between Local Health Departments and Health Centers.